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THE
CANADIAN NURSE
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VOL. XII. VANCOUVER, B.C., SEPTEMBER, 1916 No. 9

AN EXPERIMENT IN PREVOCATIONAL EDUCATION

By GRAHAM A. LAING, M. A., Director of Prevocational and Night Schools

Read at C. N. A. Convention at Winnipeg.

An important feature of modern life is the new and rapid growth of language. The tongue, handed down to us by our forefathers proves increasingly inadequate for the expression of our ideas. As our life becomes more complicated, new word forms are necessary to express the new forms of organization and of thought. One great difficulty in discussing any of the newer branches of a technical subject, such as education, is the determination of a terminology which conveys no ambiguous meaning. Modern educational developments, however, are all largely empirical, and the new terms employed to denote different branches are commonly ambiguous. There is much over-lapping in meaning as well as in organization. Technical education is a vague term, including a wide extent, and having no definite limits that are universally agreed upon. One of the subdivisions of this subject is Prevovational Education and this term in itself has a varied meaning as it is used in various places. It cannot be said that the term really conveys a distinct meaning to anyone who is not familiar with the latest developments in educational thought.

It is well, therefore, that we should consider the meaning of this term before proceeding to discuss the Vancouver experiment.

In every school there is a certain proportion of students who are motor-minded; that is, their energies are more largely of the constructive nature than of the meditative. These students do not appreciate the study of the humanities as well as they grasp the practical activities of the school work. They are more expert in the use of their hands and eyes than in the subjects demanding much memory work. This must not be taken to mean that these students are in any sense of the word mentally deficient. We have too long tacitly considered that a pupil who disliked and was unable to understand the intricacies of grammar, or who failed to follow the historical stories, was a dunce. Any careful study, indeed a mere cursory glance at the history of men who have done good work in the world is sufficient to prove that such a consideration is false to fact. In all modern ideas of education, the fact is becoming recognised that the human mind and body acting together are not so simple as they used to be thought. The teacher has been taught to use the knowledge of psychology in his teaching. It is now recognised that the organising department of education should likewise appreciate the fact that teaching of one sort is not necessarily invariably successful. Not only must the manner of the teaching be adapted to the mind of the pupil, but also the matter.

As I understand it, Prevocational Educational is an attempt to provide first, a subject matter of education which is more suited to the motor-minded child than the ordinary curriculum. Secondly, it is designed to

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discover the innate capabilities of the child in order to prevent the social and individual waste of sending a good mechanic to the clerk's desk or driving a boy with the capabilities of a lawyer or a book-keeper to work at the carpenter's bench. It is not intended to teach any particular trade to either boy or girl. It is intended to help the boy or girl to decide what trade or occupation will suit him or her best and to prevent the waste of energy upon the study of the technique of an occupation in which he or she cannot hope to succeed.

Having thus cleared the ground for a consideration of our experiment in Vancouver, I want to state a few of the difficulties which had to be encountered and overcome. Not that these difficulties are or will be peculiar to any city. They are inherent in the educational systems of the past. The fact that a child is successful in the academic studies of school does not by any means indicate that he or she would not be equally successful in those activities which demand the use of hand and eye. Nor, on the other hand, does it follow that because the pupil is dull at his ordinary studies he will be bright in the mechanical ones. Consequently, if only those students who are dull in regard to the academic studies are included amongst the students of the Prevocational School, the school does not receive a fair chance of proving its usefulness. That sort of treatment practically means that the boy or girl who is bright enough to follow the simpler of the professions receives an education designed for a professional occupation, regardless of the fact that he might be better suited to a mechanical trade. The dull pupil may easily be dull in the motor activities as well as in the meditative, and hence would make a poor workman as well as a poor clerk.

In Vancouver, the Prevocational School was opened in August, 1914, and admitted students over the age of 14 years (that is, past the age of compulsory school attendance) without requiring them to pass any entrance examination. In some cases the students were recommended to attend by the principals of ordinary public schools. In other cases they were pupils who had left school some time previously and who were not eligible for attendance at high school. Occasionally the student had been at work a year or more, but on account of bad times was out of employment and wished to gain some further education. Again several of the pupils were well over the 14 year age limit, and consequently as a rule much bigger than the ordinary pupil of school age, but whose education had been neglected for various reasons. The latter reasons are important enough to be enumerated. The fluctuation of population in all new countries, the continuous migration of families in search of better living, causes a great deal of the value of educational facilities to be lost. Several of our pupils were naturally bright, but had changed their homes so often that they had missed a great deal of schooling and objected to attending a school where they were graded with children much smaller and much younger than themselves. In some cases, again, pupils had at one period of their lives suffered from an illness which kept them from school for a long time and thus threw them behind in their studies. For the same reason they objected to attending public school. Some of the students were distinctly sub-normal in their mentality, and others were physically weak. It is safe to say that during the first year of the school (1914-1915) there were only a comparative few who were absolutely suitable for the class of education which was to be provided. We now turn to this part of our subject.

The curriculum of the school was divided into two parts. First the academic studies and second the practical. Both girls and boys received the same training as regards the academic studies. These required two

thirds of the time spent in school and consisted of the usual school education, slightly varied to suit the character of the pupils. In English composition and in arithmetic no change was made. In Literature the course was made more extensive and no attempt at an intensive treatment of the subject was made. In history a course quite different from the ordinary school course was substituted. This deserves a little more detailed description. The aim of the course was to consider the evolution of the modern economic and industrial world. The organization of primitive life was first treated in broad outline and the main stages of development —from hunting to pastoral life, the rise of agriculture and its effect upon population, the evolution of industrial occupations. This preliminary study was not confined to any one country, as the principles involved are universal and throughout the course continuous reference was made to parallel growth in different countries. More particular consideration, however, was given to the economic growth of England, including the following main stages—the rise of Feudalism, its decay and the development of the guild system; the new industry following the voyages of discovery, the development of the competitive idea with its apothesis in the Industrial revolution of the eighteenth and nineteenth centuries; the growth of the modern organization of industry and the principle of combination as illustrated by combines and mergers and trusts on the one hand and trade unions and co-operative societies on the other.

The study was correlated as far as possible with the treatment of geography, which concerned itself mostly with economic features.

Drawing and design were taught with a view to inculcating good taste.

In the practical work one third of the week was spent. The girls took a course much fuller than that given in the public schools, in domestic science, including Cooking, Sewing, Dressmaking, Laundry-work, Home-nursing and Domestic Hygiene.

The boys were turned into an empty room and provided with tools and a single carpenter's bench. Under the direction of their instructor they bought the necessary lumber and built their own benches on the model of the carpenter's bench. They then made their own drawing tables and stools. Their course of study included the drawing and carrying out in wood, of the usual joints in woodwork, with lessons in the theory of mechanics sufficient to allow of their understanding the principles upon which the various joints were based; the making of working drawings, tracings and blue-prints: the mathematics of elementary stresses and strains and the practical testing of the mathematical results.

For the moment I shall leave the consideration of the curriculum, in order that I may return to it when I consider the changes made after the first year's experience.

The great difficulty felt at first was that of grading the pupils. There were only sufficient pupils to make three classes, and under the organization of the first year these classes were held in three different parts of the city. This meant that the grading was based on geographical considerations instead of attainments. In each class the range of education varied from that of the pupil who had had no education beyond the intermediate or 4th to 6th grade of the public school to that of the students who had been one year in high school. This meant that the teachers experienced great difficulty in holding the classes together, without too great a subdivision of each class. In some cases the work was too difficult for the students and in other cases too simple.

The experience of the first year's working led to certain changes being made for the second year. The time-table was altered so that half of the students' time was spent in practical work instead of one third. The classes were centralised and the grading was improved so as to allow of a junior and senior course being established. The boys and girls were separated in the academic as well as in the practical work. In addition to this the students were somewhat better selected and were therefore more suited to the work, although the old difficulties were still present to a more limited extent. The curriculum was substantially the same, except that provision was made for night classes in Electrical Engineering for the boys, and in Millinery and Stenography for the girls. The boys practical work was extended to include metal work in sheetmetal and forge work, and the practical instructor devoted some of his time to practical mathematics.

Now as to results. Taking the girls first, there was a great deal to be desired. On the whole the physical health of the pupils was very far from satisfactory. We found that the work, both in the practical and academic side had to be made as light as possible. A hard day's work in the kitchen or sewing room was almost invariably followed by a small attendance the next day. If the girls spent the morning in the kitchen, the academic work in the afternoon suffered from what was obviously fatigue, and vice versa. Some of the girls had to be definitely excused from certain branches of the practical work owing to physical disabilities of various kinds. One student was suffering from cataracts in both eyes. One was very deaf and two or three others were hard of hearing. Several were very anaemic and were unable to stand any strain at all. The teachers, both academic and practical were forced to watch the health of the students very carefully and to vary the work so as to get as much done as possible. The results were materially affected by these health conditions. The greatest difficulty was experienced in rousing the pupils' interest and holding it for any length of time. Enthusiasm was often lacking and many experiments were tried to arouse initiative on the part of the pupils. Red Cross Societies were formed, for instance. The girls prepared bandages, and surgical dressings, they gave teas and exhibitions keeping account of funds and handing surplus to the Red Cross Funds. As far as possible they managed all their affairs themselves. Unfortunately when the girls were really anxious to succeed, they worked too hard and future work suffered in consequence. This was true of the academic side. The curriculum had to be simplified a great deal. The history course, for instance had to be made much simpler in order to be brought within the scope of their intelligence; the matter of the literature was made easier of comprehension.

In quite fifty per cent of the students domestic work involved too great a strain on health for the results to be satisfactory. In one or two instances we were satisfied that the pupils would be better suited to office work and advised them accordingly. Some were distinctly of the academic type and were advised to study for high school so that they could gain the best education suited to their mental qualities. Taken on the whole, it must not be thought that the girls' work was a failure. Even in the worst cases, the girls were getting an education that was of some value to them, and they would otherwise have been prevented from attending school at all.

As regards the work of the boys, the results were infinitely better. In the first place the physical health of the boys was much better that that of the girls. Furthermore, they were on the whole much better

suited to the practical work. Their attendance at school was much more regular.

The academic curriculum seemed to suit them and great progress was made, particularly in the mathematical line. The mathematics taught was distinctly practical; that is it was taught from the point of view of the engineer rather than from that of the educationalist. As a result, at the end of the term the boys were working problems in trigonometry and in logarithms which were beyond the scope of the second year in the high school. The intense interest displayed in the practical work had rather to be controlled than encouraged. Boys would appear at school an hour before the stated opening time (for the practical work) and would work all through their lunch hour. They were permitted to attend to work by themselves on Saturday mornings and several of them took advantage of the permission. In the night schools three boys obtained over seventy-five per cent of the examination marks in Electrical Engineering and one eighty per cent in Machine Construction and Design. The class of work done in the shop may be illustrated by a statement of a few of the objects made. In wood, two roll-top desks were made, several ordinary flat-top desks, electric standards, a set of window sashes and doors for a proposed Manual Training centre, a set of fire-irons and stand in wrought iron, two models of bridge trusses (made from the engineer's blue-prints on a scale of one-sixteenth actual size). The latter were carried out with great accuracy, the girders being made from sheet-iron bent into the proper section, and all compression and strain members were calculated mathematically and checked with the engineer's figures.

In one or two instances, boys were found to be unsuited to practical work, and were accordingly advised to take up some academic studies. In the majority of cases, however, the boys received a training that enabled them to take up with advantage, a mechanical occupation. The teacher in the academic side gave a series of lessons on Agriculture and Dairy work. Two boys so appreciated this that they are now working on dairy farms. Two have been accepted by the B. C. Electric Company and are are working in sub-stations, with great satisfaction to their superiors. A firm of heating Engineers has employed two others and the manager is enthusiastic about the work they are doing. He has, in fact, asked me to keep him informed as to boys who desire work, so that he can pick his apprentices entirely from this school. Other boys are going into shipbuilding works, engineering and so on.

Of the success of the academic work there can be no question. Trained by a teacher of wide experience and knowledge, they will enter business with a grasp of modern industrial conditions that few boys obtain from the ordinary school course.

It is not necessary to describe the work any further. But I would hesitate to criticise the working of our system by the results obtained at present, either bad or good. There is always a great danger of generalising from insufficient data. Our school has been in operation for two school years. Its highest enrolment has been little more than a hundred. One can only state what the results have been in this instance and co-relate them with the results of similar experiments in other cities, bearing in mind the important point that conditions vary from place to place, and that therefore what succeeds in one place does not necessarily succeed in another. Having regard to these limitations, I have no hesitation in saying that the education which the boys and girls have gained in the Vancouver Prevocational School will be of material service in preparing them

for their work in the future. They have not been technically trained for any trade, but they have secured a foundation which will enable them to judge of their fitness for practical work and which will give them a sound basis on which to build their future training.

The Prevocational education idea is in its infancy, but it has the germ of a great re-organization of educational systems. This is not the place in which to enter upon a discussion of educational problems at large, but it may not be out of place to point out that the failure of many systems is due to the fact that they have been copied blindly either from the past or from other countries, without definite thought as to the aims of the system or what is expected of each subject on the curriculum. More thought is being given to Technical Education than to any other branch at present and each experiment will help in the final establishment of a successful and progressive system.

THE POWER OF THE PROFESSIONAL PRESS

E. I. Johns, Winnipeg.

It would be interesting if time permitted to trace the history of our professional press. Since in the old days the functions of medicine, pharmacy and nursing were identical, we may claim our share in dim inscriptions on the walls of forgotten cities buried for thousands of years under the Assyrian sands or in the records written on crumbling papyrus in Egyptian Sarcophagi. It is a far cry from these to the wonderfully illuminated pages of the journals of the Medieval Abbesses but even to-day we pursue with interest the writings of the Holy Hildegarde —that fore-runner of the modern woman superintendant before whom the reverend brethren trembled but we must leave her and hurry on to that greatest of our pioneers—Florence Nightingale—who laid our foundations for us in this regard as in most others. Fifty years, have not sufficed to dull the interest of her "Notes on Nursing"—of her pamphlets on "District Nursing" or "The Management of Military Hospitals." But it is with conditions as they exist today that we are now concerned and it is the intention of this paper to discuss only one periodical press and to omit mention of our text book literature. Periodicals of the type of "The Modern Hospital" will not come within the scope of this discussion as they devote only a relatively small amount of their space to purely nursing affairs.

This narrows down our debate to journals such as the American Journal of Nursing in the United States, the British Journal of Nursing in England, and other periodicals of a like nature in Australia, New Zealand, Sweden, Norway and other countries not forgetting our own Canadian Nurse.

It is with the power or with the lack of power of such as these that we have to deal. Can it be truly said that our professional press has power in any true sense? How does our press compare with that of medicine, of pharmacy, of pedagogy? These are the questions we are here to debate.

Since medicine is the profession after which we model ourselves, let us see what functions their press perform.

First—Their journals provide a forum for the discussion of all problems, vital to the profession at large.

Second—They chronicle new methods and technical procedures as

soon as these are perfected thus making these available to the professional public more rapidly than would be possible by means of text books.

Third—Their pages are a mine of information to students in medicine and to research workers.

Fourth—They stand for better ideals in education, they abhor quackery and they strive to inoculate a high standard of professional honor and integrity.

Fifth—They are a terror to professional evil doers.

Sixth—They serve as a school for the younger men in the difficult art of writing for publication.

Seventh—They link the different branches of medical service together, the general practitioner, the alienist and the internist all brought into touch.

Eighth—In translation and synopsis they interpret the professional thought of one country to that of another.

Is there a single one of these functions which we might not with justice exact from our professional journals? I submit that there is Can it be said that our own National Journal, the Canadian Nurse, fulfils these? I think the Editors of that journal would be the first to say that it does not fulfil them in the measure they would desire. Now who is responsible for this condition of affairs? Certainly not the women who have struggled in these years to keep one journal alive. Our profession in Canada owes a debt of gratitude to the women, who in good report and ill, have struggled along under most discouraging conditions with mighty little money help or praise from most of us. Miss Crosby and her co-workers deserve our heartiest thanks. But no editor, however good, can make a magazine out of thin air. She needs material and she needs money. Good articles cost money and strange as it may seem, literary ability has its price, the laborer in this field as in any other is worthy of his hire.

Do you suppose the editor enjoys printing warmed over graduation addresses, full of anaemic platitudes, she does not. She only does it because such things cost nothing and fill space and because she has vainly canvassed every nurse she can think of only to be assured with a bashful smile that "she really couldn't think of appearing in print"—for justly or not there has been a tendancy to look upon those whose names appeared as the authors of articles as self advertisers and as eager for notoriety. This most unjust aspersion has discouraged our young writers and has worked incalculable harm to our journal.

If our journal is not all we should like to see it, then the fault is our own. It is our lethargy and indifference which have militated against its success.

What then are we justified in expecting of our Canadian Nurse? Well—this at least, that in this widely scattered nursing community it should serve as a link in the chain that binds us together, for is it not a little true that East is East and West is West although I do believe that in this Convention we have met and talked together as never before. But Conventions are few and far between and we need a bond which will hold us between times.

Then again we need our Journal as an instrument for the betterment of nursing education. This one phase is of such importance that a whole paper could be devoted to it alone. It is only in the last few years that we who must hand on the torch to the coming generation have even dimly

realized our responsibilities. Even yet with some notable exceptions theoretical instruction as given in our training schools would be condemned by competent educators—it lacks plan, it lacks cohesion, and above all lacks uniformity. Each hospital is a law with itself firmly convinced of the superiority of its methods to all others.

This characteristic attitude makes us ridiculous in the eyes of the public and of other educational institutions. Worse still, it limits our usefulness to our pupils. There could be no better correction than a free and frank discussion of Training School methods in our journal—a comparison of results—a kindly and constructive criticism—above all a concerted effort to standardize our curriculum and improve our teaching methods. A good beginning in this direction has been made by the American Journal of Nursing—it is a healthy sign of the times. The example of our American sisters should not be lost upon us.

An immense field claims our attention in the direction of Public Health Nursing. From the hospital woman's point of view, I am inclined to look lovingly into this promised land. We Marthas, cumbered with much serving, feel that Mary has chosen the better part but Mary should be willing to enlighten those of us whose lives are compassed about in hospital walls and whose world is a little inclined to end at the ambulance entrance. How better can she do it than through the pages of the journal. She can show us our patients before they come to us and after they leave us. She can check our results and can put her finger on us and say "thou ailest here and here" and I take leave to say on behalf of the hospital women that they would accept such kindly criticism and profit by it.

We of the hospitals could do our bit—the newer nursing procedures could be described—the clever contrivances—the conveniences of equipment could be shown by illustration and diagram. Suggestions could be given for post graduate work—a hundred undone useful ideas.

The private nurse, too—many a newly fledged graduate might profit by her advice and assistance but how seldom can one get one of these women whose lives are full of good works, to help her younger sisters with a timely written article.

If our professional journal were what it should be, we could all take counsel together in it—School nurses and superintendents, public health workers and private nurses—Yes! and pupil nurses too for she could bring with her the enthusiasm of youth and the high confidence of the unbeaten beginner which would make a stirring among the dry bones which would be salutary if not always pleasant.

In our struggle for the State recognition and registration, our journal should play a more important part. It should be a means of educating us to our needs for here as elsewhere, our greatest enemy is our own lethargy. The pioneers of the registration movement in this province will tell you that their most difficult work lay in converting the nurses themselves, that done—our august male legislators, were by comparison easy.

In closing, I would like to turn aside for a moment from the purely utilitarian—surely there was never a profession that needed to dwell upon the things of the spirit more than ours. I do not speak here in any narrow religious sense, but is there one of us who has not felt the need of shutting the door upon the world and its weariness if only for a moment? I am sure there are many of us who like myself have drunk from the Scallop Shell of quiet in our own magazine and been refreshed thereby.

Again, is it too much to expect that our journal might be a school

for future writers on professional subjects. We are slowly but surely accumulating a literature of our own but is not most of it the work of a small group of English women and Americans? Have we in Canada done our share? I am even so bold as to dream that some day there will rise among us a woman capable of interpreting our profession to the larger world outside our own borders. Has any profession suffered more from literary exploitation than ours? Over us the sob sister casts out her shoe and to the star reporter we are a joy forever. Lately it is true our charm has paled a little before the lure of the duchesses who have laid aside their coronets to wear our cap for a season. But we still exercise a fell fascination. Consider for instance, "The white linen nurse"—regard the magazine stories with their stock puppets of "cold faced superintendents" and fascinating night nurses. I have a brief for the "cold faced superintendents" she needs explaining not only to the public but to the members of her own profession. Might it not be that some day one of our own should hold the mirror up to us and show us ourselves?—not painted dolls, not cynical materialists, not plaster saints but women fit to hold the cup of birth and life and death to the lips of others.

One word more and I am done. A few months after the war broke out, I happened to be in one of the technical libraries of Columbia University, New York. The various nursing journals lay spread out on the table, our little Canadian Nurse in her modest gray dress among the number. A fellow student, an American nurse, picked it up "poor little thing" she said—how thin and pale she's getting and I had to acknowledge that she was a trifle well—Spirituelle "Why don't you Canadian nurses come in with us?" she asked, it would be more economical and more efficient, far better for both of us if you did, why maintain separate societies, separate journals, waste of money, waste of energy—there should be no nationality. There is no nationality in nursing, let's forget the forty-ninth paralell. Well—that set me thinking for she is a forward looking woman and has vision. Perhaps hers is the better, broader view, yet, I for one cannot accept it. To me there must be nationalism in nursing, yes and internationalism too—our problems though similar are not identical with those of our American sisters. We can ask their counsel and help in the solution of them but in the last analysis we must solve them for ourselves unless we are to sink into a condition of vassalage to the larger and more powerful nursing body—Co-operation, Yes! but Amalgamation, No! Across the border they have much to give—far more than we have and they are generous givers but have we nothing worth the giving which is our very own? Are our women, now overseas, coming back empty handed? Shall we not share in the spiritual new birth to which our nation is being brought? Oh! I think we are justified in struggling to maintain our own societies, our own journal. When we come to sit in council together with our sister nations as we shall sit some day, British, American, French—yes and German too, shall we not bring gifts? Shall not the flame which Edith Cavell lighted burn in us also? These gifts were bought with a price by a few but are they not the natural heritage of us all?

If Canada is a nation and we call ourselves a National Association of Nurses, let us strive to be worthy of the name and to make our journal, The Canadian Nurse, worthy of hers also.

THE JUVENILE DELINQUENT

C. O. S. Course, February 11th, 1916.

In the consideration of the juvenile delinquent the first fact which confronts us is that we are dealing with neglected rather than with delinquent children. The fault is to be found either in the parent or in some aspect of the home life rather than with the child himself. As fundamental therefore, in dealing with youngsters, who, for one reason or another are called delinquents, I would adopt what lawyers term a Chancery rather than a criminal procedure. The State is the ultimate parent of the child, and if a child has done anything which brings him within the scope of the law the fault probably rests with the guardianship of parents or others which the State allows. This in brief is Chancery as contrasted with criminal procedure. It does not assume that the child has committed any crime, nor does it place the child on trial for any offence. It examines fully the surroundings of the child before the Court, and if he is found to have committed an "anti-social act," the inference is that his guardianship is imperfect, and steps are taken toward improving the quality of that guardianship. My first thesis is, then, that in a majority of cases the delinquent child is really a neglected child, particularly if we catch our delinquent early enough. More and more in our well-organized communities is the juvenile court dealing with neglect more than with delinquency. More and more as that is so, will the Court be forced into becoming one of Chancery rather than of Criminal jurisdiction. When the Court takes this position it has absoulte authority over the adults who are responsible for the condition of the child as well as over the child himself, and thus much more can be accomplished. To have a situation exist, as it does in Montreal, when the adults who are responsible for the neglect of the child must be tried in one Court before one Judge, and then the child must be brought into another Court, perhaps before another Judge and an altogether different procedure is gone through, is absurd. The Court should have, under the law, the authority to take up the entire matter concerning the child. That would result in many more complaints being made against parents rather than against children as delinquents, and here the crux of the whole situation lies. In 9 out of 10 cases where the children are called delinquents, there is no doubt that their parents are contributory toward that delinquency either directly, or more commonly, indirectly by neglect.

Let me take this opportunity, even though it is a slight digression, to express my surprise at the figures quoted by the Probation Officer of the Montreal Juvenile Court, who said recently that at least seventy-five per cent of the children who are brought before the Juvenile Court are sons and daughters of men who are earning below $9.00 per week, while many others are children of widows who are forced to go away from home. My own experience, which has embraced several years handling just this sort of case, and part of it in communities where the poverty was as prevalent as in Montreal this year, my results were very different. During the last year in Montreal I found that the cases which we were obliged to send to the Juvenile Court were by no means generally due to destitution. The families might have been earning less than $9.00 per week, but the facts of the situation generally were that the man would not work when work was offered to him, or that both he and his wife frequently spent all of their money in drink and dissipation. Indeed, my own experience goes directly to the contrary. On the other hand, I lived for 18

months in a community which has the highest wages of any city in Massachusetts where general living conditions are exceptionally good, and yet the cases of juvenile delinquency, and particularly of child neglect, were much higher than any of the other cities and towns in which I have worked.

In dealing with so-called juvenile delinquency then, I would start off by giving to a Court Chancery powers covering all matters concerning a child's guardianship. When any child is thus brought before the Court, the Court, through its investigation department can go carefully through all the history of the child and the family, and thus gain the knowledge necessary for adequate adjustments.

Of course, there are ways of keeping socalled juvenile delinquents out of Court, and these methods should be adopted wherever possible. That is to say, Police Officers should be cautioned by their superiors and by the Judge and Probation Officers of the Juvenile Court, as to making arrests for trivial offences. Indeed, the arrest of children for what sometimes seems serious offences is decidedly questionable if the child's home conditions are altogether satisfactory. The parent is often the best disciplinarian. On the other hand, if the home conditions are unsatisfactory, any minor offence might be well attended to at once and taken to the Court for settlement, as the judicious advice and assistance of the Court and its Officers given early, might well nip in the bud a career of criminality. This involves the education of the Police force as to what constitutes a good home surroundings—not half so difficult a task as it might seem.

The next step, after an arrest has been made, is to provide a Detention Home for the child awaiting hearing. Every city should be supplied with such a Detention Home entirely separate from the jail in which the adult offenders are confined. These Detention Homes ought also to be used for the keeping of children who are desired as witnesses on important cases, etc. Such a Home would not, of course, be necessary for all children brought before the Court—only those who might disappear, or whose homes were flagrantly unsatisfactory.

The next step involves the consideration of the make-up of the Court itself. As I have already hinted, in my own preference for the type of law covering juvenile delinquency, (namely, that it be Chancery) so in the make-up of the Court I would not cling to the present form of Juvenile Court, but feel that the best type of Court for considering delinquency or neglected children is the Domestic Relations Court. In my opinion, Juvenile Courts, in general, have leaned over backwards in their desire not to have anything to do with adults, and to separate them entirely from children. It does not seem to have occured to most advocates of Juvenile Courts that both children and adults are parts of families, and that the matters which are brought before the Court are due to family weaknesses rather than individual weaknesses in children.

It is absurd that a child should be adjudged neglected in one Court and then that another procedure should have to be gone through in order that its parent might be judged guilty of neglecting it, and particularly after its other procedure, should have to appear in another Court and quite frequently before another Judge. The bad effect of such legal customs is two-fold. In the first place, as any of you who have had any dealings with Courts anywhere undoubtedly realize, the officials are not generally anxious to take action; consequently, if there is any loop hole they try to get out of it; so when an agent of a children's society or a C. O. S.

worker brings in a parent as neglecting a child he is told the best thing to do is to bring the matter before the Juvenile Court first; on the other hand, if he brings the child to the J. C. the officers of the Juvenile Court will say, "You should have brought the matter before the Police Court."

I remember a family, one of the worst that I ever had the misfortune to meet, who were living in a filthy room in a filthy boarding house. The mother was immoral, and she was using her 14 year old daughter for immoral purposes. The evidence had been carefully gathered by an efficient woman worker, and when we went before the Juvenile Court with a request that this child and the younger boy be removed from such loathsome surroundings, we were referred to the adult criminal session, and when we went to the criminal session we were told that the evidence was of such a character that it could only be heard in the Juvenile Court, and for two months this case was kept hanging. In the meantime, the mother in some way got a very decent young man with money in trouble with her daughter and it was only when the question of the marriage came up before the Probate Judge that we were at all able to do anything.

There is a second disadvantage, perhaps not quite so great as the first, namely, that witnesses and people interested get too tired to go through their stories twice, and it is distinctly a disadvantage for children who are often witnesses against their parent or parents, to have to listen or tell their stories many times before different people. This is exactly the situation where procedures have to be entered into two different Courts.

The cases to be considered by a Domestic Relations Court are as follows:

1. Involving cruelty or neglect of children.
2. Of adults contributing to the delinquence of children.
3. Of non-support or desertion.
4. Of separate maintenance and custody or divorce.
5. Of heinous crimes against children.
6. Of complaints of wife against husband, or vice versa.
7. Juvenile Delinquency cases.

The 7th clasification should be heard in a separate session of the Domestic Relations Court, known as Juvenile Sessions, but a great economy of time and money would be made, if such a Court were organized to have the same judicial, clerical, investigational, probational, medical, and alienist service for both sessions. It is the only sensible way of doing it, and just because we have been led astray by the rather sentimental cry for separate courts for children, we have overlooked this much more practical and at the same time much more effective type of legal organization.

It seems unnecessary to say that such a Court in any large city would require a Judge who would give his whole time to its consideration, but as a matter of fact this is true of but very few cities on the Continent, either American or Canadian. Such a Judge naturally should only be appointed after most careful consideration. He should not be a man who is a failure in some other department of the legal profession or is a political friend of the administration. He should be some one who is interested and by training and nature fitted to adjust delicate family affairs. An excellent example of the type of man that I mean is the man under whom I have had the good fortune to get most of the experience that I

have had with the Juvenile Court, namely, Judge Harvey H. Baker of Boston—a man of wealth and excellent family connections, of the best education and legal training and with a wonderful financial future before him in his chosen profession. He left the financial rewards entirely to one side and until his death devoted himself to solving social problems. He was the intimate counsellor and advisor of all of the social workers in Boston. If there were any difficulties about any social problems one of the men to whom we first went for advice and assistance was Judge Baker. There are such men in every community. The difficulty is to get the very best men, and to keep politics away from the appointment. The salary of the position should be an exceptionally good one in order that it may attract the very best man.

Associated with the Judge there should be a woman referee, who should hear cases involving girls, particularly where there is immorality concerned. Her decisions, of course, should be submitted to the Judge for approval. I am not at all sure but that there ought to be a woman Judge, (and there will be eventually,) but under our present laws, a woman referee is the best that we can hope for.

Although the Judge is a very important factor in such a Court, I think that I am quite safe in saying that the most important department dealing with delinquent, or neglected children is that of Probation. As an example of what I consider good probation should be, will you let me quote from the most authoritative book that has been written recently on probation: "Juvenile Courts and Probation," by Bernard Klexner and Roger N. Baldwin.

> "The whole function of the probation and supervision of delinquent and neglected children is coming to be recognized as a positive method of treatment as an active constructive force in the lives of the children under its influence. Probation is regarded less and less as a form of discharge, of "letting children off easy"an idea surviving with that of punishment. Delinquent children are put on probation because it is the most suitable educational influence for them.
>
> The period of probation should always be indeterminate in the same way as all commitments to institutions. Judges cannot possibly fix the period of treatment in advance. The probation officer must ordinarily be the judge of the proper time to recommend the termination of probation.
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> This conception of probation as a vital, active force, naturally carries with it the requirment that those who exercise this function, the probation officers—should be trained, sympathetic, and experienced men and women. They must measure up to high standards of character, personality, and ability; they must know child life, the problems of the family, local social conditions, and the use of social agencies. The probation officer must bring home to every child a feeling of the directing force of probation. The old type of loose and lifeless supervision which passed under the name of probation—permitting a boy to go for weeks without seeing his probation officer, to fail in his reports without being looked up—is being rapidly displaced by this positive conception of probation as a vital, adjusting, educational force."

In order to do work of this kind you no doubt realize that it requires regular Probation Officers devoting their whole time to the work.

Again let me quote from this recent Manual:

> "As a general proposition, the function of probation is such a delicate and continuous service that only persons who give their whole time to it can be expected to influence effectually the lives of the children committed to their care. It is just as necessary to have paid probation officers giving their whole time as it is to have paid employees in institutions caring for children, or paid teachers in the schools. The process is not one that can be undertaken intermittently, as is frequently the case when a volunteer engaged actively in some other business undertakes to care for the child on probation."

The importance of the work which the Probation Officer does, and which the Probation Department may do regarding both the delinquent and neglected child cannot be overestimated. Its function is many sided and involves a study of the individual child, of his parents, his home and family history, and a building up on the basis of that study of proper home life.

Let me explain what I mean by a separate officer, or a separate department making the investigation. An investigation often means a prying into of affairs, and as it comes before the Court hearing often prejudices the child or the family against the person making it, and of course, the person making the investigation must be present at the Court when the hearing is held, so I feel that on the whole it is bad policy to let the Probation Officer have anything to do with the initial investigation.

One of the most important parts of the Probation Officer's work is to utilize all the information that the community has. May I quote again:

> "It is in this relation to other agencies that the probation officer finds the greatest help. This is true of both general community agencies like those just outlined, or special agencies for particular troubles. The Tuberculosis Society may be interested in the family, a Relief Society may be giving aid. Where several agencies are helping, it is essential that the work should be closely related, and each worker's part made clear. This pre-supposes some formal organization such as is characteristic of well-organized charity organization societies. In the first instance there should be the registration of all families at a central office, and then a Confidential Exchange of information in regard to families helped by two or more agencies. This secured, the representatives of the different agencies interested should come together to determine a constructive plan of work. Wherever organized registration of families does not exist, the probation officer should lead in bringing together the other interested agencies to work out a plan for a given family. A large part of a probation officer's work, particularly in cases of neglect, is the focussing of all the social forces in the community upon the cases in his or her care.
>
> Many probation officers undertake a great deal too much work themselves. Where they see distress or need they are too likely to attempt to meet it without a reference to other agencies. There are many instances of probation officers raising funds to assist families; of busying themselves with getting jobs for members of the family not in their care, securing nurses and physicians in cases of sickness, all at a sacrifice of their proper work. Such needs should be referred to constituted agencies for solution."

In order to accomplish these varied results, and to really build up a home life in families where the children are delinquent because they are neglected, a superior type of man or woman is required, and the very best training is none too good. Such a position should not be given to any kind-hearted individual who wants to do good. It requires all the skill that is required by an expert surgeon and then a great deal more, and it is so often because probation officers, both paid and volunteers, have been of the kind-hearted but "rattle-headed" type that we have had the examples of probation accomplishing nothing, sometimes being worse than nothing, which are often quoted to those of us who are faithful to the principle of probation.

I can sympathize quite heartily with the Police and Court Officers who have a "grouch" against the probation system. They work for months to break up a situation which has bred criminals and degenerates and then go into Court and be told by some muddle-headed Judge, and more muddle-headed volunteer, or paid probation officer that all Mrs. B. needs is some kind Christian friend, when he himself has seen Mrs. B. steadily going on the downward path, bringing into her home criminals and all kinds of drunkards and prostitutes and making of her children errand boys to get liquor from the neighboring saloon. The fault here, however, is not the system of probation; it is good, but its administration is entrusted to people who lack intelligence and who have no social training. I am absolutely convinced that we had better have no probation in a community unless we can have adequately trained probation officers, both men and women. At the same time, I believe that if probation were carefully handled and the right people obtained as probation officers, there is no more effective agency in the community for actually accomplishing results.

There is one other important feature regarding probation which cannot be overlooked, and that is, that there should be men probation officers for boys and women probation officers for girls. The division on the basis of sex, so far as probation is concerned, is absolutely necessary. There may be other divisions, as divisions by race, color, etc., but the first fundamental division is to have both men and women for boys and girls. More failures of boys on probation are due to the fact that there were some nice ladies who have no more understanding of boys' psychology than they have of that of Bernard Shaw, have had them in hand, and what is even more serious, is the handling by men officers of girls who come before the Court most generally for offences involving chastity. For no other reason than the protection of the officers themselves there should be both men and women assigned to the work.

There is another Department of the Juvenile Court which must not be overlooked, and which is fast growing in importance—the Psychopathic Department.

Every Court dealing with family problems, should have associated with it a competent alienist, and the Judge of any Juvenile Court or the chief Probation Officer should have the authority to require a mental examination, not only of the child, but any other member of the family, or even sometimes of witnesses connected with the case.

I do not think there is anyone who doubts the importance of this line of work being conducted with the Juvenile Court. It certainly is not fair to hold as responsible for offences, children who have never had a chance.

Neither is it fair to continue keeping these children out in the community on probation or otherwise. When the data is obtained, and enough of it, some form of supervision should be secured at once, and thus the foundation steps taken toward the provision for the future.

Then too, the constructive work which such Psychological examinations and its following up by a Probation Officer allows is almost unlimited. I hope the day will soon come when if the Province itself does not provide for Psychologists in addition to trained probation service in our Juvenile Delinquent Courts, some private individual with means will step forward and furnish both of these much needed aids to a very important work.

Associated with the Psychological Department, there should be a Medical Department for physical examination of each child, and provision should be made through the Probation Officers and the Medical Probation Officer for treatment, if treatment is needed. Such departments are very important, and of very great use in dealing with both neglected and delinquent children.

There are other suggestions which may be made in constituting an ideal Domestic Relations Court, which is the thing I seem to have evolved my talk into, but I think that these four or perhaps five points stand out strongly.

First—Such a Court should deal, not only with a particular offender and also with offences against children, but with the entire matter of guardianship and contributory causes. This should be a Court of Chancery rather than a Court of Criminal Jurisdiction.

Second—The Judge should give his whole time to this work, and should be a man of wide interests and years of experience in dealing with these particular problems.

Third—And most important of all, adequate probation by trained officers, men and women, giving their whole time to the problem and constantly keeping in touch with the other organizations dealing with the general betterment of social conditions should be supplied for each Court. If possible, separate investigation and probation departments of the service should be maintained.

Fourth—Each Court should be equipped with an adequate psychological and medical staff.

It is interesting to us, as Canadians, to know that the first suggestion toward what we now have as a Juvenile Court and what we hope to have as a Domestic Relations Court in the future, came from Canada. Mr. J. J. Kelso, of Toronto, in October, 1893, urged the establishment of separate courts for children, and such a law was passed the same year in the Province of Ontario. This shows how comparatively recent all work of this nature is. Any reform so recent as this is of course, only in its infancy, and those of us who are really interested in it have a tremendous scope for our activities.

There is no doubt, but that the Juvenile Court, even in its present state of development, and in all places in which it has taken root, is doing a very important piece of work. On the other hand, there is no question that the Juvenile Court is just at its beginning as a useful organization to the community. Its advocates must not take the position that having gotten so far it is time to stop. They must be constantly on the lookout for new methods of technique and of general principles so that they may be of the greatest service to the community. The particular section of the

community which they wish to serve is children, who for one reason or another, come in conflict with our social habits or customs. Perhaps, in certain instances, social customs are wrong, and should be changed to meet the needs of the children. In many more instances, social customs are fundamentally right, and some change should be made so that the child may live up to them. If the child is defective physically, the defect should be located at once. If he is defective mentally, institutional care should be secured at once, so that he can live peaceably and happily and without endangering the community, himself, or his descendants. If the child is normal, and its home environment is impossible through immorality, cruelty or intemperance, then the child should be removed from that home environment, and placed, I feel, in another family home under adequate and proper supervision. If the home environment is bad, but improvable then there is a task for the worker in the probation office. Suggestions, careful follow-up work, and full co-operation with other community agencies should result in the redemption of the child, or children from being delinquents or neglected children, and should make them promising citizens for a future community which after all is the thing that we are all striving to accomplish.

HOME NURSING

Miss Prout

Combined with the thorough, all-round training given in our Training Schools today, I feel that I can embrace all the personal requirements essential to a private duty nurse in a very few words.

First, Tact

We go to live intimately in the private life of a variety of people. Sometimes we are expected to fill every position from "bottle-washer" to Superintendent-in-Chief;—to keep the relatives from undue worry and to keep the relatives from unduly worrying you;—to make as little disturbance of the domestic arrangements as possible;—to cause as little extra work as is possible for the help (where help is kept) and to help yourself where none are available:— the tact that is required to prevent friction in the different parts of the home may be easily imagined.

Home Training

The preliminary Hospital education cannot be too great or too varied, but this is best when preceded by and combined with a gracious home training. The private duty nurse, who has had the advantage of a general home training has an asset that her less fortunate sister will find it hard to duplicate, even with a superior literary education. The private nurse goes where the home spirit is all prevailing and she must be on friendly terms with it. She will also be likely to go into discordant surroundings, when she must rise above the sordidness and bring as much peace and help as possible.

Adaptability

The sucessful private nurse must be adaptable. Her surroundings are rarely the same on any two cases, and here she must bring the aforementioned tact into play. She must use it upstairs with her patient, downstairs with the overwrought family, and oh! how she must overwork it in the kitchen! But, sympathy is the key-note to tact. The most trying condition a private nurse has to meet though, is generally the inter-

ference of the patient's family. The relatives are so worried and wrought up by the condition of their loved one that until we have been fully tried by their standards they are apt to be suspicious and watchful. How many times do we hear Nurses remark, "If I only didn't have the family to deal with and could have the patient to myself!" But then, you see we do have the family and it is ours to learn how to contend with them. Once let let their minds become at ease in regard to our ability, and their confidence in the nurse is established, the road, as far as they are concerned, is easy travelling. Often they will ask "Nurse, what do you think?" Then, be careful. Never think anything but the most encouraging things, and be sure it is what the Doctor wants you to think. Ask him if in doubt, and in any event, say as little as possible. Nursing is more than the mere mechanical work of bathing, rubbing, taking temperatures and giving medicines. We must have the requirements of a diplomat,—to which should be added, technical skill and scientific knowledge. In other words, the ideal Nurse should be as "wise as a serpent and as harmless as a dove."

Sense of Humour

The fourth saving grace for the private duty nurse (and for every other nurse) is a keenly, but kindly, sense of humour:— the humour that enables one to just as quickly appreciate a joke, even if it is on one's self. What would we, all of us have done, at one time or another, if the humour of certain situations had not come and rescued our tired, too tautly strung nerves.

The private nurse is considered by many people as a great luxury, not for what they pay her, hardly anyone begrudges her her well-earned money (and rarely does she have to wait for that money) but because she is apt to demand a good many extra things. The druggist's bills grow to startling proportions. Sometimes her judgment is at fault when she is preparing special expensive delicacies for her patient and she incurs waste. Extravagence in the laundry is so easy. We all like to see our patients looking nice and fresh linen is so refreshing, but we must remember that sickness is a time of unusual expense anyway, and we, as nurses, enchance our value when we exercise our care in the avoidance of waste. Of course if we are nursing in the country and have to help to do the washing for our patients, well— it is hardly necessary to say "Be careful of linen."

One of the most far-reaching and important characteristics of the private nurse is the religion that makes her say "I love my work" for in that statement she embodies her love for mankind without which she will be a failure. I suppose we could go on adding virtue to virtue till we have a beautiful "dream" creature— but, after all each private nurse is the average woman, and, if she faithfully uses her talents, she must be a success.

The Attitude to the Doctor

The Nurse, having accepted an engagement, should be loyal to the physician in attendance. She should not at any time suggest by word or act, a dissatisfaction with his treatment. There is nothing which so tends to lower the dignity of the profession as to intrigue against the Physician in charge and in favor of some one who may appear more friendly. There is nothing more embarrassing to an honorable Physician than to learn that he has superseded some brother practitioner on a case by the meddlesome interference of a nurse. Every nurse who has received the proper

training and has been admitted to the profession should be ambitious to preserve its dignity and honor.

She should demand the respect of those about her by her deportment. I do not mean that she should be meek and humble and obedient to everyone, but she should be responsive. She must demand respect and courtesy from the Physician in charge. It is beneath her dignity to submit to discourtesy at his hands.

Frequently a nurse will be questioned as to what she thinks of the physician's ability, and if he has as good results as some other known doctor. The prudent nurse will refrain from discussing or criticising the physician. Small remarks are often carried far and gather fragments in their travels. She will endeavor by word and deed to inspire confidence in his treatments. A shrug, a glance, an expression, may put dangerous thoughts in a patient's mind in spite of the apparent certainty of her words.

There is often a question asked as to what attitude the private nurse should assume when the Physician on a case is discharged or withdraws. I do not think it is incumbent on the Nurse to resign on that account, even though the change in Physicians has not been made in a perfectly ethical manner. In all instances she could express to the superseding doctor her willingness to be relieved, but if in the presence of critical illness, if the patient is going to suffer, we have no right to allow personal feelings to enter into the situation.

Another question frequently occurs:— How much is expected of the Private Nurse?— We all have to answer that for ourselves. Sometimes we go into homes where experienced nursing is required and where by dint of extremely good management the family can pay a nurse, but cannot afford to hire extra help. We have all been on such cases, and we all know that no mother (supposing she is the patient) can be made comfortable if she knows that her household is going to pieces; that to have cooking and the care of the children attended to properly is as necessary to the patient's recovery as the practical nursing. Then, blessed is the Nurse who has the strength, willingness and ability to do this. She loses no dignity by so doing. However, I do not hold with the idea that as soon as the nurse is engaged the maid is discharged. As our patients reach convalescence, they demand to be entertained. It seems to be a favorite request to ask for incidents occurring on previous cases. Then beware that we betray no secrets. Do not tell any but the most pleasing experiences and the nicest things you can. Never criticize a patient you have had before;—then your patient will remember you with pleasure and will not be afraid of your carrying tales from his house. It is an error to speak of what we might call "family failings" from one patient to another. Nurses should have eyes, that seeing see not, and ears, that hearing, hear not, and a tongue, that speaking, speaks not of incidents that have occured in the course of her duty. Personal knowledge relative to our patients should be kept an inviolable secret. We all acknowledge that most nurses' lives are rather hard, but there are many pleasant spots to brighten the road. To read good books, to hear good music, to see good pictures, to travel, to meet other people of other professional interests is only to prepare ourselves for more effective service. The business man and woman can give us pointers and we need their point of view to help solve many of our own problems. A vacation every year is an absolute necessity, be it long or short. A certain number of hours off duty each day should be demanded when at all possible. Most people we nurse for

are thoughtful enough to see that sleeping time and accommodation are arranged for.

In spite of the hardships of nursing, there is much, as "Polly Anna" says, to be glad over. The private Nurse has wonderful opportunities to comfort in distress—to relieve suffering—to educate along many lines and to cheer always. If she goes about her work in a helpful spirit, she will find many compensations. Almost all doctors stand by their nurses. Almost all patients are considerate and realize that we are but mortal. We can make warm friends, and we all know the glow that comes into our hearts when our work is well appreciated.

May I add the following:

"Verily I say unto you, Inasmuch as ye have done it unto one of the least of these my brethren, ye have done it unto Me."

PIONEER NURSING IN ALBERTA

Written by Mrs, Moody, Edmonton.
Read by Miss Gilroy, Winnipeg.

The first training school in Alberta west of Medicine Hat, was started in the Calgary General Hospital in April, 1895, while that Institution was still occupying an old dwelling house not far from the Bow Marsh Bridge. The building had seen the early and rougher days of the town, and when taken over as a hospital had bullet holes through some of the doors. On the ground floor there was one ward holding four beds, an office, dining-room—which, when needed as such was converted into an operating-room—and kitchen. Upstairs there were four small rooms each holding one bed, and over the kitchen two small rooms for the staff and cook. As first pupil nurse, I entered on St. George's Day, April 23rd, and was sent to get what sleep I could in a vacant ward upstairs as I was to commence my probation by taking charge at night while the Matron and Head Nurse, who had been having a very busy time, got a chance to rest. An hour later I was roused to make room for a new patient, and from that time till the stone building now used as an Isolation hospital was ready three weeks later, occupied the cook's room by day while the cook had it at night. The new patient proved to be a woman with double-pneumonia and miscarriage of a six-months baby. The child being delivered next day and only living an hour. In the next ward was an old lady, convalescent, who left the hospital shortly after and was followed by a man with cancer of the tongue. Across the hall from him an Irishwoman with synovitis of the knee, who was an inveterate talker and used to make the most of any opportunity she could get to talk to the tongueless man, till he besought us by gestures to pitch her through the window. The only man downstairs requiring attention at night was a bronchitis case, but the Matron used to retire for the night with the warning to the new probationer that ten minutes must not elapse without her looking at him in case he should choke. Then a D.T. case was put upstairs opposite the pneumonia ward, and the probationer was not to go out of sight of his door in case he took a notion to come out and jump over the bannister. Needless to say these rules had to be obeyed in spirit rather than in the letter, but all spare moments for some nights were spent sitting on the top step of the staircase by the cancer man's door, in sight of the D. T.'s door, and sound of the bronchitis man's coughs at any rate. The last Saturday

and Sunday in the old building were wakeful days, and the spare time at night was spent packing such things from the medicine cupboard, etc., as could be spared till after the move on Monday. Monday morning I retired as usual but was called up in an hour, as the men had come for the furniture and my bed must go. The remainder of the day was spent helping with the five patients who were transfered to the new building, in un-packing and putting in order various articles in the new building, and finally after attending to a newly arrived patient and being too exhausted to eat the evening meal, going back on night duty with only five hours sleep in sixty hours. When the patients were quietly sleeping I rolled myself in a blanket and lying down on the bare floor of an empty ward slept for thirty minutes, after a survey of my charges I returned to that most welcome blanket and floor and slept again for exactly thirty minutes, after which I kept guard for the remainder of the night; retired about eight thirty a.m., and was awakened about three p.m. to go out in a shack at the back of the hospital and nurse three children through scarlet-fever. Of the remainder of my probation there is not much to record except that I was put on day work and the charge of this isolated ward, while a nurse of eleven months standing was put on at night till the children and their mother (who was laid up with hospital sore throat) were convalescent. That autumn I held the title of senior nurse having under me a junior and a probationer, but all through the three years and three months of my training the work was a mixture of probationer's to head nurse's work and responsibilities. The largest number of patients in the hospital at one time was twenty-four, which does not give the impression of heavy work until you take into account the fact that there was no house doctor or orderly, and that although there were two flats, with five private wards and sometimes four general, there were never two nurses on night duty unless one was specially detailed to watch by a dying patient. The result of nine weeks on night duty with, part of the time, sixteen typhoid cases and four others, and only a little volunteer help, including in addition one night, a new born infant and his mother, was a case of typhoid poisoning for the senior nurse and nearly seven weeks in bed. During my illness the junior nurse was kept on night duty, and for some nights had the work and responsibility of caring for a boy of eleven, dying from gunshot wound in the forehead, a man with D. T.'s, who could never be depended on not to tear up his bedclothes or walk around, sometimes over the other beds and tables, and—upstairs—the senior nurse alternating between stupor and delirium; not to mention a dozen or more less serious cases. However, out of the twenty-nine typhoids that autumn all made good recovery in course of time. Thoroughout my training the work was much the same, varying from slack times to weeks and months when it seemed hardly possible to keep up; and marked at intervals by special cases which stand out in my memory of the whole period, as the man who lost both hands from frost-bite, a boy of eleven who recovered from typhoid after repeated hemorrhages from nose, mouth, ears, and bowels; and the plucky girl telegraphist who after having lost a leg through a fall from a train, kept up her own and her mother's spirits by the thought that she had her living at her finger ends. At one time a doctor who had been put in charge of the medical work for the Stony Reserve decided to make use of the operating room and nursing at the general hospital for the benefit of his Indian patients. The first case was satisfactory to everyone as the boy was not too badly affected with scrofula to be curable, and having gone through the school at the

reserve, could read and write English as well as speak it, and was therefore able to interest himself in books and magazines and to remain fairly content in his exile from his own people. However, the satisfactory results in Henry's case encouraged the doctor to experiment further, and his next case was a young squaw who for four years had remained in one position in her teepee, one hip being so badly affected as to make it impossible for her to move about. The case was incurable, the patient understood no English and had absolutely no companionship except when Henry was allowed to visit her, as her mother had to be shut out after being caught escaping down the back staircase with our patient on her back. The result of this torture of loneliness for the poor creature was that she started to scream at the top of her voice one Sunday afernoon, and announced her intention of keeping it up until she was allowed to leave the hospital. As two members of the board happened to enter the hospital just then a special meeting was called for Monday morning and a ruling made that no Indian patients were to be admitted to the hospital. The nurses salaries for the first two and a half years was five dollars a month for the first six months after probation, six dollars per month for the second six months, seven fifty per month for the second year and ten for the third, but six months before I graduated the rate was raised to seven-fifty, ten, and twelve-fifty per month for the respective years. As there was at the time, only one woman nursing in town who had had any training, the doctors were anxious to get nurses from the hospital whenever possible, willingly overlooking the fact that the nurses had sometimes not been in training long enough to have had the necessary experience. The result was, that the first two maternity cases in my experience were private ones, one being a still-born child, killed by the shock of bad-news, and the other a fine healthy child which arrived before the nurse reached the house but with the doctor in attendance. In the latter case when I was preparing to dress the child the aunt entered the room and stood looking on for a minute or so, then remarked "I suppose you are getting used to handling a good many babies in the hospital" "Yes" I replied "I haven't kept count," whereupon the aunt departed and left the inwardly trembling nurse to slowly but safely complete her task of bathing and dressing an infant for the first time. The first graduation took place July 25th, 1898, and shortly after I took up the work of private nursing. As there were only, with one exception, utterly untrained women engaged in nursing at the time, women who were prepared to do the washing and housework and attend to her patient betweentimes, and who charged ten dollars per week for their work, the public had to be gradually enlightened as to what it meant to be nursed by a trained nurse, and to the fact that a nurse could not give her patient proper attention and fill the position of washerwoman and general servant at the same time. Also that when a nurse spent over three years fitting herself for her work, her services were worth more than those of an untrained woman who could neither give the same care nor take the same responsibility.

During the five years spent on private nursing, my charge for maternity cases was twelve fifty per week, and sometimes a dollar per day for time spent waiting. For medical cases fifteen dollars per week, and once for a case of scarlet fever, sixteen dollars per week. The calls came from city cases, ranches seventeen, twenty, and thirty miles from town and doctor, country towns from Innisfail to Lethbridge, the Crows Nest Pass, and Banff. Trains to Macleod ran Tuesday, Thursday and Saturday, returning on alternate days, so that once in response to a telegram from Pincher Creek I left Calgary on the midnight express Sunday night,

and travelled via Medicine Hat and Lethbridge to Pincher, three hundred miles instead of a hundred and fifty to save twenty-four hours in getting to the case. Another time in response to a telegram from Banff, I took—by the doctors advice—the first westbound freight I could get out on, left Calgary at 8 p.m. and reached Banff at 8 a.m. next day, a couple of hours after the nightly express, to wait for which had been considered an inadvisable delay. The case was an interesting one, re-infection from scarlet fever in a boy of seven, place— the C. P. R. Hotel, dread on the part of the manager— that the fact should become known by the other guests. Two and a half weeks were spent in quarantine, a corridor with eight rooms and a balcony being partitioned off for the entire party, consisting of three ladies, child, nurse and ladies maid. One drive of thirty miles to an accident in the country, was made in a single seated buggy, the seat being shared by a stoutish man in a fur coat, a slighter man and the nurse; leaving town at eleven thirty on a January night, fortunately mild and moonlight, and arriving at their destination at five thirty a. m., decidely stiff. Another memorable drive took place one August night while still at a ranch case, a shout coming from a ranch across the river to know if the nurse could be borrowed for the night. The ranches were only two miles apart by actual distance, but for lack of a boat or local bridge, the distance by road was about fourteen miles. A comfortable rig was lent for the journey and the hired man deputed to drive it, but one of the horses had never been in harness till that day and had been used all day on the hay cart. The other, a big ill-tempered beast bearing the name of Policeman, had three days previously in objecting to a steep grade at the crossing of a coulee, kicked till he upset the wagon, spilled the load and kicked the driver on the head as he fell. The first and worst four miles of the road were covered before the moon rose. A narrow stream had to be twice forded, the second time under the shadow of trees in such darkness we could not see the horses' heads and the water was over the axle. The landing was made a little off the track and the rig hung poised for a few seconds while we sat uncertain as to whether it would keep its balance or tip over and spill us back into the stream. Shortly after, in ascending a little rise the doubletree jammed in the wheel and I had the pleasure of holding the reins while the driver got out and freed it. Then there were gates to be opened, gates that had to be searched for in the darkness, a task which I preferred to sitting in the carriage and watching for rebellious action on the part of the team. Then came the coulee with the steep grade, but a neighboring rancher had put in a good bridge and improved the grade, so when the bridge was found the driver turned his team down the hill at my call and they followed me quietly across. A mile or so further and the moon rose over the hills and lighted a smooth trail for the remainder of the trip, so that we arrived safely about one a. m., after three hours travelling.

A year and a half spent in charge of a hospital in the Crow's Nest Pass was a continuation of pioneer work, there being as a rule no night nurse, and sometimes no boy even to carry in coal, empty ashes, and mop the floors. The patients were chiefly miners and lumbermen of all nationalities. Emergency cases in the doctor's absence had to be attended to by the nurse, and were usually gas burns, scalp wounds, or severe bruises. One difficult but interesting patient was an Italian miner named Cimette. Nearly six feet tall, young and strong, with a wife and family left behind in Italy, he came to work in the coal mines of a neighboring town which did not boast a hospital. New to everything, he was in his ignorance more afraid of a coyote which troubled the neighborhood than

of the deadly dynamite kept for blasting in the mine. Helping himself to a stick as he left his work one night, he started on the half-mile walk to his shack intent on scaring that coyote as badly as he could. Lighting the fuse, he threw the dynamite from him, but when it did not explode as quickly as he expected, picked it up to find the reason, with the result that it exploded in his hands and he was brought to us with both eyes blinded and both hands terribly mutilated. At first he was a most trying patient, as he understood almost no English and was obstinate and impatient under his sufferings. Fortunately he understood and spoke a little French, in which he was able to make his wants known to the nurse, who also found her knowledge of the language exceedingly useful for the frequent remonstrances necessary to make Cimette understand that the bandages over his injured eyes were not to be clawed off with the fingers left to him on one hand, in the vain endeavour to find out whether his sight was returning. His name for the nurse was "Sorelle," which one of his friends explained as being their Italian name for the nursing sisters, and it came to have a pleasant sound in her ears as poor Cimette became convalescent and would sit for hours wherever placed in the ward or out in the warm sunshine, a patient, helpless figure. At one stage of his illness, before his hands had healed sufficiently for him to help himself, the terrible weariness of being absolutely without occupation of any sort, made him crave something to eat or drink far more often than he had any need of, or the nurse time to supply, and his repeated cry of "Sorelle, pomme," "Sorelle, donnez-noi de pomme!" had to be disregarded, and even sometimes a firm refusal given to the plea, "Sorelle, boire?" Then he begged for a match, and for hours would sit with it between his teeth, or—as he learned to use his two fingers—would carefully stow it away behind his ear, like a clerk's pencil. His French was so mixed with Italian that it was difficult to understand him except in the most simple sentences, but after a while he picked up a little English which helped a good deal. It was hard to answer his questions about his eyes and hands, for one eye was irreparably injured and the other appeared almost hopeless, and his moan: "Je serais mieux mort!" seemed as true as it was sad. Then it was most pathetic to hear him say in a pleading tone, if anything went amiss in his efforts to feed himself with his poor, maimed hands: "Sorelle, I no can see!" Long continued and careful treatment restored to one eye sufficient sight for Cimette to guide himself, and enabled him to help in the work of the shack where he and his brother lived.

Another Italian was Tony, a wizened little man of about 50 years of age, if one could judge by his appearance, but alert and quick in his movements as any boy. Tony was working on the construction of a short railroad line when he was stricken with erysipelas and wandered away in his delirium over hill and prairie for three days and nights without food or shelter, till he was found and brought to the hospital. There he remained for two months, and when convalescing one of his ways of amusing himself was to call out in the middle of the night till his attendant wakened and went to him, when he would coolly ask, "You sleep good, Charley?" occasionally having to pay for his joke by swallowing some harmless but nasty concoction.

Tony was so impressed by the kindness shown him during his illness that he seemed to consider the hospital a harbor of refuge in times of distress, so finding himself out of work nearly a year later, he came to the hospital and hung around with a wistful look on his dirty face, shrugging his shoulders and asking for work. At last, feeling sorry for

the ragged, disconsolate looking little man, the nurse set him to chop wood for the hospital and immediately he was happy. Till dark he worked and then refused to leave the premises, insisting on sleeping in the hay shed, where he was allowed to make his bed for a few nights. Then it was decided that if Tony was going to work about the place he must be given some decent clothes, and allowed to sleep in the hospital, so one evening a dark blue sweater was found for him, a small sized flannelette shirt, and a pair of pyjamas, and Tony was ordered to take a bath. Visiting the wards about half-past nine, he was discovered in the act of emptying his bath clad in pyjamas, sweater, broad-brimmed hat and top boots, the most ludicrous figure imaginable. Next morning the nurse was horrified to hear those same boots stamping around the wards at the unreasonable hour of 5 o'clock, and hastening in, found Tony diligently emptying ashes, fetching coal, etc., with as much clatter of boots and pails as it seemed possible to make. Ordered to be quiet and go back to bed till the 6 o'clock whistle blew, he only smiled gratefully and assured the nurse that he had had sufficient sleep, and when told he must be quiet and leave those things alone as he was waking all the sick men, he nodded vigorously and proceeded to clatter around with one finger on his lips, saying, "Hish!" as though he were the only quiet person on the premises, till the nurse in despair ordered him away from the hospital.

Not all the time was taken up by patients in the wards, however. Often a large proportion of the day's work consisted of the treatment of outside cases, which had often been mistreated or neglected before coming to the hospital. Among these was a small boy who had chopped his instep through boot and stocking, and had the wound dressed at home with a piece of raw bacon and a not overclean rag. He came to the hospital when inflammation had set in, and if he did not feel like it, did not come at all for three days at a time instead of daily, as bidden. A tall Icelander who chopped his foot in the logging camp, dressed the wound with chewing tobacco, and came to us a week later when he found that instead of healing under his treatment, his foot had become much inflamed. He was much amused that we considered it necessary to wash his foot, which was highly colored from the scarlet lining of his rubber boot, and with a comprehensive wave of his hand, which took in everything from antiseptic soap to dressings and bandages, informed us it did not need all that, he only wanted us to give him some 2% carbolic and something to wrap it in—he could dress his foot.

There was the railway breakman, who, obligingly holding a chisel for the engineer, received the blow on his lip instead of the tool, and had to run to the hospital to get a stitch put in before the train pulled out. Also his friend on another train, who, getting a finger crushed at a small station where there was no doctor, trimmed it off with his jackknife, wrapped it in a clean handkerchief wet with carbolic, and was ready for a more correct dressing when the train reached our town 25 miles farther on. One busy morning two men were burned by an explosion of gas in the mine. One was so badly burned that he was put to bed a ghastly object in his white cotton mask and neck wrappings, with two big helpless bundles in place of hands. The other, a huge black-haired German, with a blind eye, having only a slight burn on one wrist, was told to go home and return later for another dressing. He did return, but not in the way we expected, as he came in the absence of the doctor and escorted by one of the Mounted Police, with a face battered and blood-stained as the result of the boisterous manner in which he had celebrated his escape from death, and the rough handling that he had

received during the process. He was certainly neither a pleasant nor interesting case as I cleansed, stitched and bound up his wounds while the policeman held his head and tried to make him hold his peace; and I heartily wished them both at the ends of the earth when the patient turned to his keeper with a sickly smile and said: "I tell you these girls in the hospital know their business!" and the policeman fervently responded, "You bet!"

"Sorelle"

THE UNMARRIED MOTHER

The last few years have shown wonderful progress in the treatment of illegitimacy, but we have many miserable hypocricies to overcome in our community before the "natural" child is given the same social and economic advantages which the legitimate child receives.

As a progressive people, our attitude must change toward the treatment of the child born out of wedlock.

It is outside of all reason that this child should be shunned and neglected when he is the only one of the triad who is in no degree responsible for the situation.

Last March (not quite a year ago) the Norwegian Parliament passed a law making three important provisions for the illegitimate child: First, that the State grants aid to the mother during the latter part of pregnancy, and for a certain length of time after the birth of the child. Second, it grants the right to the child to bear the father's name, where paternity can be established. And third, it grants equal inheritance rights to the father's property, as that of the legitimate child. This law went into effect on January 1st, 1916.

In England at one time, a girl was punished by imprisonment, if she gave the name of the father of her child. England, however, has advanced with other countries, and now the illegitimate father must take his share of the responsibility and cannot get off scot-free, as heretofore.

Each of the forty-eight states has its own social problem with which to combat, and it is not surprising that a lack of uniformity in the laws should exist. For instance, the age of consent varies in a most surprising manner, ranging all the way from ten years in the state of Georgia, to eighteen years in the states where a franchise has been granted to women. In Quebec, the age of consent is fourteen years, yet a girl is not considered responsible to give herself in marriage until she is twenty-one years of age. Does this not seem most inconsistent?

Personally, I would not urge marriage in these cases, for the man is usually a miserable specimen, and disastrous results are almost certain to follow forced marriages, although Dr. Evangeline W. Young, of Boston, believes that these irregular marriages compare favourably with the regular, as neither *assures* a woman support and love. She emphatically states that there can be no satisfactory solution of the problem of illegitimacy, where the father is absolved from his share of the responsibility.

Most of the foreign countries have laws forcing the illegitimate father to financially contribute toward the support of his child. If he is the shiftless, "no-good" type, he is placed in the workhouse, where, under supervision, he will make fifty cents or more a day, and these earnings go toward the child's upkeep.

The bastardy law of Illinois forces the father to pay a maximum sum

of $550.00 to the mother of an illegitimate child, such sum extending in payment through ten years.

Massachusetts with several other states, declare that the father must pay "such sums as the court may order"—no amount being specified or suggested.

Connecticut says:—"Father must pay a reasonable sum for maintainance of the child," while Delaware claims, "The father must pay Ten Dollars to the mother, Ten Dollars to the doctor, and not less than Five Dollars or more than Ten Dollars a month for ten years for the care of the child."

And in Quebec, the court decided the illegitimate father's responsibility toward the support of his child "according to his means."

The bastardly laws of Massachusetts are much more satisfactory than in other states, particularly since the passage of the 1913 law. Proceedings are now entirely criminal in form and nature. They were previously civil and criminal. It means that extradition is possible in case of the flight of the guilty one. This also means that the jury, in order to convict, will have to decide that the man is guilty beyond a reasonable doubt, and necessitates more adequate evidence, greater caution in conviction, and consequently less chance of blackmail.

A most important decision is that the adjudged father must be just as responsible for the support of an illegitimate child as though it were legitimate. If he fails to provide and is convicted, he may be fined Two Hundred Dollars, or imprisonment, or both.

Last year the Boston Conference on Illegitimacy sent out a group of questions to one thousand persons (including doctors, lawyers, overseers of the poor, officers of women's clubs, and manufacturers), their object being to collect data concerning public opinion in regard to illegitimacy.

(I might give you a few examples of the questions)

The first question was:—Would you take into your employ a man or woman who was a so-called illegitimate child?

Ninty-nine women's club officers answered	yes.	Two, no.
One hundred and one physicians answered,	yes.	Three, no.
Eighty-six lawyers answered - -	yes.	None, no.
Sixty-four manufacturers answered - -	yes.	None, no.
Seventy-eight overseers of the poor -	yes.	None, no.

Making a total of four hundred and twenty-eight, yes, and five, no.

Then the question was asked:—Would you advise the separation of the unmarried mother and her child?

The sum total of answers to this was:—Eighty, yes, and two hundred and forty-eight, no, and it is interesting to note that fifty-nine lawyers failed to answer this question, while the largest number in any other group avoiding the question was six. Fourteen physicians were in favor of separation, and seventy opposed. The other groups, except lawyers, showing the same ratio as doctors.

Boston registered 19,241 births during the year 1913 and of these 858, or about four and a half per cent were illegitimate. This number included the names of thirty-four babies registered as children of married mothers, but whose mothers had acknowledged to different charities that they were illegitimate children.

To go back to the vitally important question of keeping mother and child together. I would say that we find in our work that it is without doubt the mother's safeguard. Motherhood does unmistakably bring

out the higher qualities in a woman, and if the unmarried mother has a spark of love for her child, that will be an incentive for her to live a cleaner and better life; indeed, I believe that if a girl is headed for the underworld (as many of the unmarried mothers undoubtedly are) and motherhood overtakes her, she is very fortunate to say nothing of the community!

The question is often asked:—"What about the baby when he is grown older?" —this I cannot answer, for my work with this special problem has not extended over a long enough period of time to tell how it will work out, but this I know, that it is most important and truly vital to the child to be kept with the moher during the nursing period.

It has been whispered in Chicago that the infant mortality among the illegitimate children was very high, over one thousand being lost sight of annually, and in 1912 the Juvenile Protective Association undertook an investigation campaign. The facts obtained point to three main causes for the high morality among the illegitimates—

First, instead of recording all vital statistics at the City Health Dept., some are recorded by the county clerk, who is not really interested in the matter.

Second, the laxity of institutions and individuals in promptly and fully reporting that which the law demands—that is, that all lying-in hospitals and maternity homes must send to the Health Dept. a full report, bearing the date of admission of prospective mother, her name, address, and age; a notice of child's birth, date, sex, and statement as to disposition of child; name of doctor who attended the confinement; and again a notice of discharge of the case. Then if a child is given out for adoption, another blank is filled out, giving full information of mother, child, and foster parents. Each of these blanks must be signed and sent to the Health Dept., within twenty-four hours of admission, birth, discharge of mother, or disposition of child, as the case may be.

The institutions are also to make monthly reports to the Department of Health.

The third cause of the startling mortality among the illegitimate, evident from the facts obtained, was the inadequate provision for placing children, who cannot, for various reasons, be kept with the mother.

Dr. Young, Health Commissioner of Chicago, estimates that the appaling number of illegitimates in that city amounts to nearly three thousand. This is just Chicago alone, and as Professor Fisher of Yale puts the value of every child at $4,000.00 (and I believe the illegitimate child has an equal chance to become a useful citizen, as those who start in life regularly) imagine the economic waste there will be if we do not provide for the thousands of illegitimate children of our country.

Can you imagine if that percent of all domestic animals were to die, how the government would bend every effort to ascertain the cause—and effect a cure?

All illegitimate children in the city of Leipsic are at birth made municipal wards, and are placed in good homes where they are examined regularly. The result is that the death rate of illegitimate infants is only half that of legitimates.

(This is one of many lessons in economics which we might profitably learn from the Germans.)

The institutions of our city have done, and are doing a big work, but the fact remains that 50 per cent. of the institutional babies die. The

majority of these babies are illegitimates, and deprived of the breast milk, and we all know quite well that artificially fed babies do not have the same chance as those kept with their mothers and given the nourishment which nature has provided for them.

Then also we realize that if one wee inmate is attacked with illness, (even a cold) that malady is almost certain to be passed right along to the rest, and where some may throw off the trouble, others with less resistance will succumb. The heads of institutions are terribly handicapped in their struggle for these little lives, and I shall always feel a deep appreciation of their efforts.

When an illegitimate infant dies, the popular comment is, "What a blessing!" —not at all! These children have numbered in their ranks many gifted and distinguished persons, and it would be quite unworthy of our humanity and intelligence to hold an irresponsible parentage against the child. The illegitimate child should have the benefit of any movement for the conservation of child life, for he can be (and has been) made a useful citizen. We could quote instances where this kind of children have risen to prominent citizenship.

To insure the conservation of these children, the unmarried mother must be re-established in the respect of the community as well as in self-respect. The first thought of the girl burdened with this responsibility is to get rid of the child at any cost, and unfortunately too many avenues are open for this procedure.

When a girl places her baby in an institution at a stated price (that is, to give up her baby permanently) it makes one feel that she has been allowed to buy her freedom, and what does her freedom mean? —A probable repitition of her sin, and in fifty cases out of every hundred, she ultimately lands in the underworld.

The chief effort of the Women's Directory in placing-out work is to keep mother and child together in domestic service, but I realize more and more that we cannot make a hard and fast rule, for each case must be decided on its individual merits, and there is a certain proportion of cases where another plan better serves the good of all. For instance, we get quite a group—particularly foreign girls—who have neither qualifications nor will to do domestic work, and we must consider the advisability of placing some such girls back at the work they were doing before pregnancy occurred, providing in such instances, a boarding-home where their babies can be with them at least nights and Sundays.

We avoid as much as possible placing for short convalesence, more than one mother with her child in a private home, for we find it a disadvantage to place together girls whose influence upon each other may be questionable.

The private Homes, after being thoroughly investigated and found suitable, are to my mind the most desirable plan for placing mother and child for short convalesence—or for boarding the child when necessity demands it. The home influence in both cases is invaluable, and the personal interest and love shown each individual case must have its gratifying effect.

I was deeply interested in hearing Miss Elizabeth Durham, of Boston, tell of her pioneer experiences twenty-four years ago—how she hired a horse and buggy and sallied forth to adjoining towns to find suitable places for her cases—she found out names of the important persons of each town (the minister or doctor, for example) and asked confidentially for the rugged truth about Mr. Smith or Mrs. Jones.

We have not yet reached the mark, financially, where we can make a personal investigtion of all the country homes where our girls are sent, but we hope that time is not far off. Right now, we can only rely on the co-operation of the various ministers—which means much writing, and in many cases, much impatient waiting.

CAUSES

It is safe to say that in one case of illegitimacy there is more than one cause—usually a number—but feeble-mindedness is the principle one. To say that fifty per cent of the unmarried mothers are defective mentally is giving a very conservative estimate. In one almshouse in Pennsylvania a year ago there were one hundred and five mothers of illegitimate children, and of these, one hundred were feeble-minded.

It is now generally realized that the only effective method for handling the feeble-minded is to provide permanent custodial care where they may be safely segregated and preventd form reproducing their kind.

For the protection of society, we would again strongly urge legislature providing for the care of the feeble-minded girls, whom we feel sure from personal contact with such cases, will become the helpless mothers of successive illegitimate children. The lack of proper provision for this class is not only a danger to the community, but is a handicap to the school system, public health work, and our municipal government. These cases are laboured with by public health inspectors, social workers, and others without result—and only waste of valuable time and money.

Dr. Richard Cabot, of Boston, advised me when beginning my work with the Women's Directory, to weed out the mentally deficient, as it would only be squandering time to try to do anything with these cases—he said "Of course you'll have an institution in Quebec for such a group" —and I am glad I did not know the lack of this vitally essential provision here, for I would have hesitated to acknowledge this to him.

At this same time I visited the Massachusetts School for Feeble-Minded at Waverley, and had a most interesting talk with Dr. Walter Fernald, the superintendant—he states that it is the high grade defective rather than the low grade, who is a menance to the community, as their feeble-mindedness is not generally known. The industrial part of the scheme at Waverley is splendid. The inmates who do well under supervision make almost everything they use, such as brooms, towels, stockings, sweaters, mitts, etc.,—besides doing their own printing. Then, there is the farm which supplies a great deal of their food.

Community studies have definitely proved that feeble-mindedness is an important factor as a cause of juvenile vice and delinquency, adult crime, illegitimacy, and other forms of social evil. Then what an economical move on the part of the government it would be to instigate a farm colony for this group, which could be self-supporting. This would keep many offenders out of the jails, and money in the treasury.

Dr. Fernald says there are reasons for believing that feeble-mindedness is on the increase—then it is obviously up to us to fight this cause. I could go on indefinitely filling time with this particular cause, but must pass on to others, amongst which might be mentioned flabby standards in the home, no home at all (as in the case of immigrant girls who come to this country alone) dull mentally not amounting to feeble-mindedness, over-sexed nature, ignorance, lack of education, etc., etc.

As the average girl is poor, the question arises, "Is she driven by direct economic necessity (through earning an insufficient living-wage)

into this method of making a living?" —No! She is not! In the first place, a large percentage of these girls are in domestic service at the time of their misfortune. Whatever may be the drawbacks of household service, it does not drive its followers to crime through immediate lack of food and shelter. The girls telling their own stories, rarely mention an economic reason for their downfall. All figures taken on the subject of prostitution, uniformly agree that the woman servant in private or public establishments has always been counted upon to furnish something more than a third of the prostitutes of the country. Too many employers look upon their maids as pieces of machinery in their homes, losing sight of the fact that they are human beings with heart and soul. A sign of interest on the part of the mistress might prevent many a girl from taking the perilous step downwards. This, I maintain, is the employer's share in this great social problem. Many women, employing servants, interest themselves in an outside social work, but the big part they might play with their own domestics never occurs to them.

Bad early training is a decidedly prominent cause for illegitimacy. and I strongly feel that the mothers with whom we social workers come in contact should be carefully instructed how to safe-guard the child—that is, to explain to her the many temptations which may confront her. and above all things, to acquaint her with nature's laws. This knowledge gleaned in a proper way, rather than on the streets, or from unscrupulous associates, makes an entirely different impression on the child's mind.

I should like to say in conclusion, that if our immigration laws were not so lax, we would not have such an overwhelming percentage of undesirables to deal with in our country. Surely now is the time to rectify this inadequacy, when we expect an influx of foreigners into Canada. It is not quantity, but quality we want, and if we had our medical examiners stationed at the other side of the water to examine these poor creatures before they get on the boats, what a saving of money and heartaches it would mean—how much more satisfactory all round.

Let us all join hands, hearts, and souls, then, in working to secure for our country and province, these five things:—

A more restricted immigration that will keep the undesirables out.

A liberal education of the growing boy and girl in sex hygiene, which will make them cleaner, purer men and women.

A breaking down of the great differences of opinion on the subject of illegitimacy between Protestants and Roman Catholics.

The enactment of laws that will compel *both* the father and mother of an illegitimate child to be directly responsible for its welfare.

And last, but by no means least, the establishment of institutions for the segregation and supervision of the feeble-minded.

HARRIET B. BRODERICK.

CANADIAN NATIONAL ASSOCIATION OF TRAINED NURSES

The fifth annual meeting of the Canadian National Association of Trained Nurses, opened in the upper assembly hall of the Royal Alexandra Hotel, Winnipeg, on the afternoon of June 15th, 1916, with the President, Mrs. R. Bryce Brown, in the chair, assisted by the Treasurer, Miss Des Brisay, and the Secretary, Miss J. I. Gunn.

Opening the convention, Mrs. Brown said: There were one or two things I did want to remind you of, although I had no intention of inflicting a long speech upon you. In the first place, I wanted to remind you that the members are just as much a part of the Canadian National as the officers. Sometimes you forget that. I would ask you therefore, to take part in all the discussions; and to consider well when you are asked to serve on the committees. Sometimes you are liable to either thoughtlessly say that you will act and then neglect the work, or else say you can act, when, perhaps, owing to circumstances, you cannot.

Now, it is more or less of an honor to be asked to take part in any of the Canadian National meetings. Your part, the part of every one of you, is to help to make the meetings a success. The officers come here from a distance, and do the best they can; but it is your part, the part of every member, to help to make each meeting interesting and instructive.

A great deal of business has accumulated on account of not having a national meeting last year; and we have got to attend to all this and clear it up at this convention. We do not want to have anything left over except what is absolutely necessary.

Every nurse who is a member of any of the societies affiliated with us is a member of the Canadian National, and has the same voice as your President or any member of the Executive. I want you to take part in the business, and give your attention and help in the discussions. We want to hear anything that will help to shed light on any dark subject.

I think that is all I wanted to speak to you about just now. There has been some literature left here about Polish relief, also some by a member of the main branch of the Secour Nationals. I will ask Miss Gunn, the Secretary, to call the names of the affiliated societies. Each representative will stand accordingly and give Miss Gunn her name and credentials, in order that we may prepare for the voting at the election of officers.

Following the President's address, the roll of the representatives was duly called, and Miss Kinder and Mrs. Moodie appointed as scrutineers.

The Chairman then called for the report of the Secretary, Miss Jean Gunn. Before Miss Gunn commenced to read the report, Mrs. Bryce Brown said: Those of you who listen to this report, which is so condensed, will not begin to be able to form an idea of the amount of work which Miss Gunn has done, and the promptness and thoroughness with which she has done it. This association has at present officers all over the country. Questions have been sent at various times to these officers, seeking information that would be of benefit to the Canadian National; but many of the members of the council did not even take the trouble to thank us or to bother to give us the information that we had asked for. You must remember that you are put on the council of the Canadian National for the reason that we want your help. If you are not willing to help, do not allow your name to go upon the council. The responsibility for this rests with all the representatives, inasmuch as they elect the council.

There followed the reading of the reports of the standing committees. The report of the Publication Committee (Miss Crosby, convener) was read by Miss Gunn. Prefacing the reading, the President said: There has been some criticism of our neglect of the Woman's Century Magazine. Miss Jessie Scott was asked to take that work, and could have done it very nicely; but she went to the war. One would think she might have sent something from the front that would have been of interest for the magazine. Miss Gunn has tried to fill in the vacancy, but owing to her many other duties she has had no time to send in anything to the magazine. Miss Crosby is quite right when she says that the news of the nurses' world in the column which the "Century" has reserved for us, has been conspicuous by its absence. I hope that some of you, during the coming months, will be able to send something of interest from the nurses' world for this column.

The report of the eligibility committee (Miss Elizabeth G. Breese, convener), was read by Miss Helen Randal, and adopted. The President said, apropos of this report: This year we are going to ask the Eligibility Committee to see if they cannot increase our membership. A great many nurses' associations in Canada would be members if they knew we wanted them. This year we are going to ask the Eligibility Committee to see that all the societies mentioned are accepted and included as members of the association. The report was read, and it was moved by Mrs. Oban, Toronto, seconded by Miss Colvin, New Westminster, that it be adopted.

The report of the Programme Committee (Miss Brown, convener), was read by Miss Westman. Mrs. Brown said: I think, in this respect, the programme before you will speak for itself. Some of the papers were not sent in. This shows a lack of interest, and I am very sorry to see it. I do not want any of the members to get the idea that such-and-such a thing which they have been asked to do does not matter. You would not be asked to do things if they did not matter. I am sorry that Miss Brown had so many disappointments in the matter of these papers. The report was read, and, on the motion of Mrs. Hill, Winnipeg, seconded by Miss Jamieson, Toronto, was adopted.

Mrs. Brown: The next reports are those of the special committees. I want to hear all these; they will be taken up to-morrow and acted upon. I want you to come to the morning meeting with something to say.

The reports of the Federation Committee and of the Superintendents' Society were read. It was moved by Miss Kinder, Toronto, seconded by Miss Gilroy, Winnipeg, that the discussion upon the Superintendents' Society's report in regard to junction of the two societies be laid over until the next day's session. Miss Randal, Vancouver, then read the report on the "Investigation of Training Schools," and made the suggestion that a regular committee be formed to assist in standardising the work.

The Public Health Nurses' Affiliation report, prepared by Miss Eunice H. Dyke, was read by the Secretary, Miss Gunn.

Mrs. Bryce Brown: There is just one thing you will have to think about—that is, whether you will form a sub-section of the Canadian National. The Public Health Nurses will then have to draft a constitution and by-laws of their own and become affiliated in the regular way. The adoption of the report was moved by Miss Gunn, seconded by Miss Colvin, and carried.

The report of Miss Annie Weyer, Secretary of the War Committee, was then read by Miss Gunn.

Mrs. Bryce Brown: As you know, this committee was originally appointed to try and collect money for a memorial to Florence Nightingale. But the war broke out, and the Florence Nightingale memorial became a thing of less immediate interest; so the money collected was used on the soldiers' fund. The war committee will give you a report of what has been done in that line. All the nurses have been working towards raising money to help our soldiers at the front.

Following the reading of the report, a letter was read from one of the nurses who went to the front.

Mrs. Brown: I am sure that after hearing the report, there will be no difficulty in getting a live committee to take charge of that work this year. I want each of the delegates here to think of some good nurse competent to do the work and help to raise the money to send to these nurses. As you see from that report, practically all the money was collected in Toronto. Too much cannot be said commending the work of the Toronto nurses. There was over $500.00 raised in Toronto and sent to the nurses in France.

It was moved by Miss Randal, seconded by Miss Smith of Calgary, that a vote of thanks be recorded and a letter sent to the Toronto nurses, for their work.

The report from the committee appointed to handle the matter of purchasing the Canadian Nurse (Miss Locke, Toronto, convener), was read by Mrs. Oban, Toronto.

Mrs. Brown: The Canadian Nurse committee has done a tremendous amount of work in formulating a workable plan for taking over this magazine. You women must remember that the Canadian Nurse is really your paper. Miss Crosby is the only one who has faithfully stood by the Canadian Nurse. She has stood by it since Dr. McMurchy gave it up, and has given her best, with no prospect of return. You have heard Mrs. Locke's report and can appreciate her work. Two thousand dollars may seem an exhorbitant price, but you must remember that we could not start a magazine for that sum. I think it well worth $2000.00 to us. You do not, however, have to take any action on this today: think about it till it comes up tomorrow morning. The "Canadian Nurse" has been a paying venture for the last four years. For Miss Crosby's sake, as well as for the other consideration I have mentioned, we ought to be able to pay a little more for the "Canadian Nurse" than it may actually be worth. The adoption of the report was moved by Miss Oban, Toronto, seconded by Miss Randall.

The report of the transportation committee was laid before the meeting verbally by the president, who was the convener of that body. The report of the nominating committee was submitted by Miss Hill of Winnipeg. Mrs. Bryce Brown, after adjuring the nominating committee to be careful not to nominate without being sure of the position of the nominees, their knowledge of the nomination, and their willingness to accept, deleted from the nominees for president all the names but those of Miss Rowena Stewart, Miss Dobbs of Lethbridge, and Mrs. Brown. It was then moved by Miss Jamieson of Toronto, that the nominations for president close.

Further deletions were made, leaving the nomination list as follows: For vice-president, Mrs. Pafford, Toronto, and Miss Goodhue, Montreal, for second vice-president, Miss Gilroy, Winnipeg; treasurer, Miss Des Brisay, and secretary, Miss Gunn, returned by acclamation.

Mrs. Brown: In selecting the councillors, I would remind the committee to try, always, to get an executive that shall represent all portions of Canada, uniformly. I hope also that members will try and help the council as much as possible, so as to get an executive meeting once in every two or three months.

The president then read the names of those nominated by the committee for councillors. The name of Miss Johns, of Winnipeg, was added to the list. It was then moved by Miss Colvin, New Westminster, that the nominations close.

The session concluded with the calling by the president of a group of delegates from several principal districts, and asking them after the close of the meeting to confer with Miss Tilley on the subject of local council work. The adjournment was moved by Miss Randal, seconded by Miss Ewing.

* * * *

The convention resumed its sessions at 10 o'clock on Friday morning, June 16th, with the president in the chair.

Mrs. Bryce Brown: The first thing with which we have to deal this morning is the incorporation of this association. It was not until we began actively to work that we discovered the Canadian National was not incorporated; and this is something that must be rectified at once. I would like somebody to move that the association be incorporated as soon as possible, and that a committee be appointed to deal with the matter—unless there is something to be heard on the subject beforehand. This is a large association, and I would like to hear opinions from two or three. Any member of any affiliated society has the privilege of expressing an opinion.

It was moved by Miss Waddell, Toronto, seconded by a member from Hamilton, that the Canadian National Association be incorporated, and that the proceedings toward incorporation be left in the hands of the executive.

Mrs. Brown: Another matter to which I wish to call your attention is this: that we are not affiliated with the Canadian National Council of Women. We feel that we should be so affiliated, and should have the right to submit names to the national convenor. A national association should be uniformly representative of the entire Dominion. National convenors should be chosen from all the provinces. Mrs. Tilley has tried to get into touch this year with nurses from every point. If we become affiliated with the Canadian National Council of Women, your president, as a member of their executive, could bring up matters of interest to nurses before the national organization.

It was moved by Mrs. Oban, Toronto, seconded by Miss Jamieson, Toronto, that the Canadian National Association of Trained Nurses take immediate steps to become affiliated with the national council of women. The motion carried.

Mrs. Brown: The next thing to deal with is the invitation from Montreal. The nurses of Montreal extend their invitation, and intimate they would be delighted to have us, and would do their best to make the convention there a success. I think we ought to be more than glad of this chance to hold our 1917 convention in Montreal.

It was moved by Miss Dewey, Toronto, seconded by Mrs. Hill, of Winnipeg: That the Canadian National accept the Montreal invitation to meet in that city next year. The motion carried.

Mrs. Brown: I hope that, some day, we will have so many invitations on hand that the discussion will be upon which city would be the best to meet in. I might mention now, that next year we hope to arrange the date of our meeting so that it will occur just before the meeting of the American National Association of Philadelphia, so that the nurses who come from a long way off, as for instance in the west here, will be able to go from the Montreal meeting to Philadelphia, and thus take in the two conventions without much additional expense. It will therefore be the duty of the executive to try and arrange this; for though you will probably not all be members of the American National, it will be interesting, as they are a very large association and cover an immense range of subjects of general interest to the nursing world. I might add, by the way, that yesterday I did not call for the report of the committee on arrangements, of which Mrs. Moodie is chairman. However, I do not think we need to have any report from Mrs. Moodie. The results of her work form an ample and favorable report in themselves. Now, I want a committee of two on resolutions, to act with Miss Dixon and Miss Rowan of the Superintendents' Society. Miss Dixon will instruct you as to what to do.

No suggestions being forthcoming from the members, the chairman suggested the names of Miss Westman, Regina, and Miss Stoddard, to assist in the drawing up of resolutions.

Mrs. Brown: Now, the first of yesterday's committee reports that we will take up is that of the federation committee. Mrs. Oban, you will remember, presented the resolution from the Superintendents' Society on this question of federation. There seems to be little in this report that calls for special attention. The Superintendents' evidently do not wish federation, and that of course is their business. The Canadian National does not amalgamate, moreover; the idea was merely to have the first meeting a joint one, so as to get more time for the business meetings, and not have them interrupted with the papers, which could all be read at the joint meeting.

Miss Gunn then read the report of the Superintendents' Society upon federation.

Mrs. Brown: With regard to that portion of the resolution in which the Superintendents' Society suggest an informal meeting, that of course is their privilege, as it is the privilege of any of the affiliated societies. They have a perfect right to a joint meeting of the executive, without official status. You may deal with that matter as you wish. As far as the joint work of the two arrangements committees is concerned, Mrs. Moodie has done as much work for the Superintendents' as she has for the Canadian National. Now, what do you wish to do with this resolution from the Superintendents' Society?

Mrs. Oban: I have to say, in regard to this federation report, that I think we can and should accept the report as it stands. Then they cannot throw it back at us that we would not accept their suggestion.

Mrs Brown: As far as the amalgamation idea is concerned, I do not know where that suggestion came from. Amalgamation was not intended in the report of the committee; because we do not amalgamate societies. That is not our idea. We affiliate them.

Mrs. Oban: Would it be possible, speaking of affiliation, to bring in as a branch of our organization, the Public Health Nurses, including the social service workers. We might bring them in as a chapter.

Mrs. Brown: Having chapters, is something we will have to discuss later. I know the Public Health Nurses do want a chapter in the Canadian National. But let us get this other question disposed of. Will somebody make a motion?

It was moved by Miss Jamieson, Toronto, seconded by Miss Ellis, Toronto; That the Canadian National accept the resolution given them by the Superintendents' Society in regard to the report on federation of the two bodies. The motion carried.

Mrs. Brown: The next matter to deal with is the column in the "Women's Century." Miss Scott, who had charge of the work, left, as you know, for the front, and that left most of the work for the secretary. Now, we have a literary woman in Winnipeg, I would like to see her take the position. It means, briefly, that something has to be sent from the National to the nursing column of the Women's Century, once a month. I would be very much obliged if Miss Johns would undertake this work for the next twelve months.

Miss Johns: This takes me by surprise. I did not see a copy of the Century. I would however be very glad to help—because I have got to practice what I preach, you know. I must have assurance of help, though. But, I might add, do you think it is wise for us to dissipate our energies for a page of that nature?

Mrs. Brown: It is worth while to stand in with the National Council of Women. The Century is their paper, and they have given us this column to use, and we have not been using it. The Women's Century is the mouthpiece of the National Council, and may, if we make a proper use of this column, become the mouthpiece of the Canadian National. Of course the Canadian Nurse will be published by us too, later I hope—then some of the matter contributed to the Canadian Nurse by the Canadian National can also be sent to the Century, when suitable. There is always something we could tell them about, our acts and interests. All the national associations are supposed to be represented in the Century—that is why we have been given our column by the National Council. We should have news from all over Canada in that nursing column in the Woman's Century.

Miss Johns: I did not realize before the exact status of this magazine. I thought it was a commercial undertaking, and reasoned that we do not want to give ourselves over to any commercial organization.

Mrs. Brown: It is a magazine published by the National Council of Women. If we are affiliated with them—and most of our local branches are affiliated with the local council—we should speak through this national women's paper.

Miss Johns: If I undertake this work, it must be with the understanding that I am to have some help.

Mrs. Brown: That is just the point upon which I am going to speak. One nurse only understands what is going on in her own portion of the nursing world. If any of the other delagates come into possession of information of value to the column as to something in their own districts, they should send it to Miss Johns, who will prepare it for the magazine. Remember, we have had this column available for a year, and yet I venture to say that nothing whatever was sent to Miss Scott. The understanding then is that Miss Johns will send something once a month to the Women's Century Magazine. We are very much obliged to Miss Johns for her acceptance, and hope the delegates will do all they can to help her by sending in news from their respective districts.

Miss Gunn: The Women's Century is a very good paper, and presents a comprehensive review of woman's work along all lines. I think we should show our appreciation, of the column they have given us, not only by contributing live articles to that column, but by subscribing for the magazine.

Mrs. Brown: I have here a resolution from the Ontario Graduate Nurses' Association on the question of midwives (the president here read the resolution). Now, that is something that we, as a national association of nurses, do not want to have happen. Midwives, sent out where there are not sufficient doctors, are doing work that medical men should be doing. I am glad the Ontario nurses have taken this matter up. Suggestions on the matter have also come from B.C. and some of the other provinces. Now, what do you want done with this? You shall all have an opinion on this matter.

Miss Randal: I think it would be a disgrace if we did not make some effort to stop this kind of thing. By means of the Victorian Order, we have a chance to check it. If we let the midwives think we are incapable of doing anything, it is bound to grow worse.

Miss Armstrong: I think they are a menace. In some cases around Edmonton, patients have lost their lives by the inexperienced and unskillful attentions of midwives.

A Member: Is there anything in the Medical Act which would prevent midwives from acting.

Mrs. Brown: There is something in the Act; but the trouble is, that the burden of proof rests with the medical association. If the family sends for the woman and the baby comes all right, nobody hears anything about it. If the baby dies, the family say: "Well, we could not get a doctor." Every month in British Columbia we have these cases coming up; but the medical profession cannot prove it. The midwives always arrange it so they cannot be found out. The patient does not want to say anything. The midwife says: "I will take the case for such and such a price, and do all the work. If you have a doctor, you will have to pay him $25 and you will also pay me $25." The patient of course says: "We will not bother about a doctor, if everything is all right." It cannot be averred then that the midwife actually said she was not willing to have a doctor. We had one case in British Columbia in which, after weeks of discussion, we could not prove it, even though we all knew the midwife had acted. The husband would not say anything definite. Nobody would say anything. They could not prove that the midwife said she could handle the case without a doctor.

Mrs. Tilley: I would like to speak very strongly in support of the resolution, and also to say that the Victorian Order is doing all they can in the matter.

Miss Armstrong, Edmonton: It seems to me that the question we have to solve in this matter is the providing of these sparsely-settled districts with proper medical help. I have been out in the country in a shack; and when I would go fifty feet from the door to get ice, I would hear the coyotes howling around. Nurses do not like to take these cases away out in the country; and that is really why there are midwives. They will always go, anywhere.

Miss Gunn: It would appear, then, that the widwives are filling a want which the nurses are not willing to fill.

Mrs. Tilley read her a confidential letter, containing suggestions on the matter on hand.

Mrs. Brown: It is like waving a red flag to a bull to say "midwife" to a doctor. I would like to hear more from the delegates in this matter, as it affects their respective districts.

Miss Gunn: For Ontario, I may say that nurses feel very much the same as the nurses here. While it is all very well to send a resolution voting against the introduction of midwives, we do nothing to help these patients who are in outlying places, out of reach of medical assistance. It seems to me that we ought to formulate some plan by which we could help the Victorian order. Up to date, we have done little in that direction, except to criticize.

Miss Flaws: Do the members of the Victorian order take absolute charge of the patients?

Mrs. Brown: They commence and do the absolutely necessary things. I remember one time when I wrapped myself up in coats, my sister's fur coat and a coonskin coat outside of that, and drove 36 miles in the face of a winter wind blowing at about 50 miles an hour. I was on the road four or five hours, and my eyelashes and eyebrows were frozen. I would not like to have done this again. Yet there are nurses in that district of the Victorian order that do that all the time.

Miss Armstrong, Edmonton: I myself have gone forty miles, with a pair of double blankets wrapped around me. We had a case from the Misericordia hospital. They called up for a nurse to go out where a boy had been shot, at a place called Lac Ste Anne, 40 or 50 miles from Edmonton. When the nurse got there, she had to go four miles out into the country from a village where there was a drugstore and phone. The boy had a wound right through his side, and the packing of the gun had been blown into the wound. The family had done as well as they could, but the wound was in a terrible state and 24 hours old. The nurse was afraid of gangrene. She went back the four miles into the village, and phoned to Edmonton for a certain doctor. He said he could not go out that distance, unless she could guarantee $100. She said, of course, that she could not guarantee anything. Then he said he would tell her some one who would go for $100.00. But she said she could not guarantee that amount. In despair, as far as getting a doctor was concerned, the nurse went back and resolved to take hold of the case herself. She took a spoon, sterilized it, and used it for a curette. There was gangrene, as she had feared; but she stayed right with that case for three months. Twelve people lived in that shack. She stayed there and pulled that boy through; and he is now at the front. The only money she got was a collection taken up at the instance of the member for Lac Ste. Anne, amounting to $75.00—the average pay of a city nurse for three weeks, and she had spent more than three months. Of course, I ought not and do not intend to speak against the medical men in Edmonton. This was only one isolated case of a doctor making a refusal of this kind.

Mrs. Moodie: I think Miss Armstrong was very fortunate in her medical man.

Mrs. Brown: We know that the doctors are our best friends, although they are certainly willing to criticize us. But the point is, what are you going to do about this resolution to appoint a committee to try and formulate some workable scheme by which we can help the National Council of Women without having midwives sent to us in Canada.

Miss Waddell (Toronto): I would move that a committee be appointed to assist Miss Tilley in this work.

Miss Johns: Miss Caroline Von Blarcom, of New York, mentioned when I was visiting there that 60 or 70 per cent of the labor cases there are dealt with by midwives. They are filling a definite need, and there was talk of recognition of them. They have not taken any definite steps since I left, that I have heard of, in this respect.

Miss Gunn: Was it not Miss Caroline Von Blarcom who made a survey of certain conditions in England, and brought back reports of blindness in children, and other horrors.

Miss Johns: I believe so. Her idea in regard to midwives was merely, however, to try to assist in some material way to have the need they were filling met adequately.

Miss Gunn: In New York they have a much larger foreign population than we have here. Numbers of the foreigners there, especially the Italians, will not employ male physicians; and where there are so many midwives in demand, it is not to be wondered at that they have firmly established themselves.

Mrs. Moody: There is too much of the spirit of pick and choose among the profession. Doctors do not pick and choose their cases. A doctor would not refuse a case because it was a poor case. There are more charitable acts performed by the medical men than by the nursing profession.

Mrs. Brown: I think that is only too true; and I have known doctors to give the nurse part of the fee, where she got on the case first. I think the doctor has always been our best friend, and always will be. There are very few doctors who would not handle any case, no matter what the circumstances attending it, in an emergency.

Mrs. Moodie: I had a nurse call me up to ask the doctor to give her a case in a nice house, where there were servants.

Miss Rowan: At the conclusion of the war, 600 or 700 nurses who are not now in Canada will return, probably accompanied by many English nurses. That, it seems to me, will help to solve in part the question of scarcity of nurses.

A Member: Yes, that is true, but there are many nurses who will not take an obstetric case when anything else offers.

Mrs. Brown: That is quite true. Many nurses say—you often hear them: "I like surgery." This is comprehensible, because the average surgical case, where the patient is perfectly normal, is little care to the nurse, except for the patient being a little fussy, after the first three days. But I could never understand the antipathy to obstetric cases. In the obstetric case you have the mother to educate, and there is nothing more pleasant than this. Every case in obstetrics is a great missionary opportunity to the nurse who realizes the opportunities of her profession. But to come back to what we were discussing, about midwives. Another point we must consider is, that these cases in the country are not always maternity cases. Now, will somebody make a motion.

It was moved by Miss Waddell (Toronto), seconded by Miss Gilroy (Winnipeg): That a committee be formed from the Canadian National Association to confer with Mrs. Tilley in the matter of relieving the needs of the country in the matter of medical service.

It was moved by Miss Randal (Vancouver), seconded by Mrs. Oban (Toronto): That the matter mentioned in the previous motion be left to the executive committee of the Canadian National Association, to appoint a committee to serve with Miss Tilley.

Miss Gunn read a resolution from the graduate nurses of British Columbia.

Mrs. Brown: This committee from British Columbia has been very active in finding out what is being done with the trained nurse who has returned from the front. In many cases these nurses have been forced to go to work at $20 a month. Most of them, when they return, are unable to work for some time. Many of them have no money to support them during this period; for trained nurses do not save as a rule. They get their money in a hard life; and when they come off a case, they feel like spending it. Now, I trust the Canadian National is going to think up some scheme to lay before the National Council of Women for taking care of the returned trained nurse who is in need. I think that this meeting might send a resolution to the National Council of Women. Perhaps this has been done.

Miss Randal: As far as I know, nothing of this kind has been done.

It was moved by Mrs. Oban, seconded by Miss Colvon (New Westminster): That Mrs. Tilley act as the representative of the National Association, and that she be asked to confer with the local Council of Women with regard to a plan for the care of nursing sisters on their return from the war.

Mrs. Tilley objected that it would be a little awkward while the midwife question was pending, for her to approach the National Council. An amendment was, therefore, moved by Miss Gunn, seconded by Miss Gilroy, that, after the affiliation of the Canadian National with the National Council, the president of the former body, being then a member of the National Council executive, be asked to act.

Mrs. Brown: I will be very glad to take this matter up with the National Council of Women. A good many of our nurses are nervous wrecks when they come back from the front, and will require some time to recuperate.

Mrs. Brown: The thing which next comes up is the report on the investigation of training schools. The standardization of training schools is a matter which properly belongs to the superintendents' society. I think this report should be taken up in their association.

Mrs. Tilley: Should that matter be left entirely in the hands of the superintendents? A great many of the hospitals have felt that two years is ample for the training they get, and the third year is lost to them. The hospital benefits by the third year, and not the pupil nurse.

Mrs. Brown: The small hospital through the country is something we have got to stand by. We must give the pupils proper instruction in return for their services. These young women have got to come out fully equipped.

Mrs. Tilley: But if she finds that she is making no progress. Does not the young woman who leaves one hospital and applies to another for entrance run a chance of being turned down as a chronic complainer.

Mrs. Brown: I think we are getting away from the point. Shall we ask our secretary to refer this report to the superintendents' society?

This was done. It was then moved by Miss Laidlaw, of Hamilton, seconded by Miss Kinder, of Toronto, that Miss Dyke continue as convener of the public health committee. The Florence Nightingale fund and the war committee's report then came up for consideration.

Mrs. Brown: I want to remind the meeting that there has been no expression of opinion concerning untrained women who have gone

to the front. It should go down on record that the Canadian National made some reference to them at its meeting. Untrained women have been sent to nurse our soldiers at the front; and it seems to me that every patriotic society in Canada should consider this very fully. We let our brothers and husbands and fathers go to the war, and in some cases they are being cared for by unqualified nurses. It is a national disgrace. We hope that the time will come when we will be able to dictate our own terms as to the appointment of nurses for the front.

Miss Gilroy: We have given our best men. Why cannot we give our best services in nursing them?

Miss Gunn: I did apply to the association in Toronto to refuse to recommend a certain nurse because I knew that she was not a woman to be sent on active service. She told me: "Well, I will get there anyway—you see." I knew her doggedness, and wrote to Ottawa, giving her name and all particulars, and telling of her refusal by the Canadian National. Well, a few weeks after, I got a card from her in France, saying: "Arrived among the first."

Mrs. Brown: I knew of another applicant, who was refused by the Canadian National, chiefly, or at least partly, because her health, it was known, would not stand conditions at the front. But she got over, nevertheless. She lasted about two weeks; and then the government was at the expense of sending her back home again. I understand they are now going to take her across a second time. But to come to the point, what form do you want your protest to the government to take. I think it should be framed in the form of a resolution. I do not see what we can do except keep on protesting.

Miss Gunn: As the Canadian National Association and the principal nurse body in the Dominion, we offer the government to enroll the nurses. We secured credentials, and selected nurses with scrupulous care. We did not wait for the mails. All the provinces wired us; and we sent lists of qualified nurses to Ottawa in advance, so that if they had to appoint nurses suddenly, they would have the lists right at hand. But there was absolutely no attention paid to these lists.

Mrs. Brown: I admit the executive are at their wits' end in the matter.

Miss Cotter: Probably our power will be increased as the ballot is extended throughout the Dominion.

It was moved by Miss Ellis, seconded by Miss Randal, Miss Mayhew and Miss Barr: That a vote expressing disapproval of the action of the government in the selection of nurses be sent by the secretary to the government, asking that they recognize the Canadian National as the body to select the nurses.

Miss Gunn: I think the lack of attention paid us may be due to the fact that we are not incorporated.

Mrs. Brown: That is a mistake which we intend to rectify as quickly as possible. We have now to deal with the purchase of the Canadian Nurse. We have sounded a good many people as to the value of the good-will of this magazine. None seem to think it worth anywhere near $2,000; but if we were to start a new magazine, we would require considerably more than $2,000. If the Canadian Nurse were our own, we could make it a national Canadian magazine. Miss Crosby has done much for the Canadian Nurse, but the nurses as a whole have not. We have just two courses open—to buy it, or to start a new magazine. But the matter needs careful consideration. Most of the societies without consideration have said they would prefer to buy the Nurse to starting a new magazine. We want you all to vote the way you think your members would wish you to vote.

Mrs. Oban: When the Canadian Nurse was organized, it was started at the General Hospital Alumnae. As their secretary for the past six or seven years, I feel it my duty to come forward and say that really as an alumnae we feel ashamed of ourselves that we have allowed the matter to go on as it has. We have not done our duty by the magazine. As practically the largest alumnae in Canada, it was our unanimous feeling that we should buy the magazine. If the management of the Canadian Nurse find that the amount subscribed is not sufficient, we will be willing to give a larger subscription. In the meantime, I certainly vote for the purchasing of the Canadian Nurse.

Miss Gunn here read the financial statement of the Canadian Nurse, showing an annual net earning of $442.21. The secretary next read the agreement drawn up between the Canadian Nurse editorial board, of which Miss Gunn was a member, and Donald O. McKinnon, of the Commercial Press, outlining the conditions of the taking over of the magazine. She told how the books of the magazine had been carefully gone over under the direction of the lawyer of the editorial board, who thought that $1,500 was a very good price for the magazine.

Mrs. Brown: Others thought $500 quite enough for the good-will of the magazine.

Miss Flaws: As a member of the committee, I feel in duty bound, to tell you what we found out. Mr. J. Ross Robertson said the magazine was not worth the price mentioned. We went to one of the members of the Globe Company. Ganier, of Saturday Night, told me that under existing conditions we should not pay more than $500.

Miss Gunn: The editorial board is perfectly in accord with the members of the association. We all feel that the price is too much; but we have either to take it or leave it. The arbitrators, if we call in their services, are paid so much a day for their work—a pretty good figure, I believe—and, if they are not busy at anything else, they keep right on arbitrating on the Canadian Nurse, and their services might cost us more than the total price of the magazine.

Miss Flaws: If you take this $2,000 and start a magazine, you have your subscription list ready-made. All the members of the association would necessarily become subscribers, and that would give it a good circulation at once.

Mrs. Brown: But we have not got the $2,000 right now. We are going to pay for the magazine in instalments. Mr. McKinnon has generously spread it over four years.

Mrs. Flaws: Mr. McKinnon will be a very surprised man when he gets this $2,000.

Miss Randal: It seems to me that, if we are sure we can take it over, it would be a great advantage to do so.

Miss Laidlaw: I think it is the only thing to do.

Mrs. Brown: The Canadian Nurse committee has given us their report. They recommend that we buy the Nurse or start a new magazine. I do not think there is any question in the matter; because if we do not buy it, we have to lose the good-will of the publishing house, and start all over. Will somebody make a motion?

It was moved by Miss Cotter, seconded by Miss Reynolds (Hamil-

ton): That the Canadian National Association purchase the Canadian Nurse. The motion was carried with enthusiasm, unanimously. It was then moved by Mrs. Oban and seconded by Miss Ellis that the executive take steps to make all necessary arrangements for the purchase of the Canadian Nurse.

The voting on the officers was the next proceeding. Ballots were distributed and the president instructed the members as to marking them. The president, Mrs. Bryce Brown; the secretary, Miss Jean Gunn, and the treasurer, Miss Des Brisay, were returned by acclamation. In the case of two of the council nominees, Miss Jean Brown, Regina, and Miss Retallack, St. John, there was a tied vote. As Miss Retallack was an eastern representative, she was, on the recommendation of the chairman, voted in, in order that the council might more uniformly be representive of all Canada.

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The third and concluding session of the Canadian National was held at 2:30 p. m. on Friday. The opening feature was an address by Mrs. Wood, of the Secour Nationale on the "Condition of the Women and Children in France." Mrs. Wood told of the hospital supplies sent to France—everything needed by the new baby, comforts for the mother; boys' cots; girls' cots; women's cots; pyjamas, etc. From Toronto there had been sent 1,600 tins of corned beef, a donation that would be greatly appreciated, on account of the monotony of the food. Acknowledgement of the receipt of every consignment was duly received from Paris. At the conclusion of her address, Mrs. Wood was given a standing vote of thanks.

A paper on "The Unmarried Mother," written by Miss Harriet Brodrick, secretary of the Women's Directory, Montreal, was read by Mrs. Cockburn, Toronto.

Mrs. Brown: We will now resume the business left over from the morning meeting. The last thing was the election of officers. I may say I am very glad to be your president for next year. I hope that, in your nominations, you have given only the names of people who will be willing to stand.

Mrs. Paffard, Toronto, was elected first vice-president; the secretary and treasurer, Misses Gunn and Des Brisay, were re-elected.

Mrs. Brown: Miss Brown, Regina, and Miss Retallack, St. John, tied in the voting this morning. Miss Retallack was declared elected, as we had nobody on the council from the eastern provinces. We wanted to have the east and the west equally represented; and we knew that this would have been the wish of Miss Brown, too.

Referring to the Canadian Nurse, Mrs. Brown said: Your principal duty is to help by your subscription. As far as I know at present, there is no increase in the subscription price, which is very reasonable, being merely $1 per year. It may be raised next year, as I am informed that a professional journal cannot be published for $1 per year and made to pay.

Miss Gunn then presented the report of the transportation committee.

Mrs. Brown: Ordinarily we find it better to leave the appointments of committees to the executive council. Will somebody make a motion to this respect?

It was moved by Miss Ewing, Toronto, seconded by Miss Ellis, Toronto, that the appointment of committees be left to the new executive.

A Member: Has the association put itself on record as regards the sending overseas of the untrained nurse?

Mrs. Brown: We are sending a resolution of protest to Sir Robert Borden at Ottawa.

The new business of the convention was then taken up.

Mrs. Brown: The first thing is the revision of the constitution and by-laws. The constitution and by-laws of the Canadian National are very simple. The choosing of a committee for our constitution and by-laws will be done by the executive. What I want is a suggestion from any member as to the best way to go about the harmonizing of the constitutions and by-laws of the affiliated societies. I should think the best way would be for the affiliated societies to send in their constitutions and by-laws, so that all those of the smaller societies may be changed where necessary to harmonize with those of the larger societies I am sure you will all feel that this will work no hardship on the smaller societies, and will be for the good of the Canadian National.

A Member: I would like to ask what at present are the requisites for becoming a member of the Canadian National.

Mrs. Brown: Well, chiefly this: We cannot take individual nurses. Each of the provinces has its provincial association; and it is better for each nurse to belong to her association, and come in with us as an affiliated member rather than as an individual member. The membership of this association is divided into the active, permanent and honorary members.

Miss Gunn: I think the councillors ought to be increased. Six is not enough for this association. There ought to be enough so that every province would be represented on the council.

Mrs. Brown: I would like to get some idea of how many public health nurses we have. (The nurses stood up and were counted; nine were present). Now, do you want a sub-committee on public health, with a chairman, convener and secretary, and to transact your own business as a sub-committee; or do you want to send to Miss Dyke your suggestions that you form a public health association and become affiliated? Have you a public health association in Winnipeg? I think the Canadian National should be large enough to take in every nurse in Canada. Will you have a sub-committee, or, like the superintendents, have your own association?

It was moved by Miss Cotter, seconded by Miss Jamieson: "That we recommend to the committee on constitution and by-laws that they arrange their constitution in such a way that a standing committee on public welfare might be arranged in the constitution and by-laws."

The treasurer's report was then read by Miss Des Brisay, who said, in connection with the part of the report dealing with payment of dues: "It has been the custom to send out notice of dues that are payable; and a great many members of the association do not seem to understand that the year begins with the annual meeting. It begins with the annual meeting and ends with the annual meeting. The fee for the next year is, therefore, due immediately after the annual meeting."

Mrs. Brown: The fees due at a certain time, and not paid before that time, will mean the taking of the name of the member off the list.

Miss Des Brisay: Those who send in their dues by cheque

should remember to allow 10 cents for exchange; otherwise the 10 cents is deducted from the cheque and the association is out two or three dollars on the exchange thus paid. Remember, that a cheque for the amount of your dues does not pay your total fee, unless the exchange is added.

It was then moved by Miss Randal, seconded by Miss Gray: That the association have a chartered accountant audit the books instead of a nurse, as in the old way.

Miss Gilroy: I would like to move that the expenses of our president be paid by the Canadian National Association.

Mrs. Brown: It is always more dignified for any association to pay for its president's traveling expenses. This year, however, I was sent by British Columbia, or I would not have been financially able to come. It is not dignified to feel that the president cannot come because she cannot pay.

It was moved by Miss Gilroy, seconded by Miss Ewing: That the Canadian National pay the expenses of the president to and from the annual meeting of the association. The motion carried without discussion.

Miss Johns: As this is the first meeting at which Miss Crosby has been unable to be present, I have thought that she would like a copy of the group photograph taken by the photographer.

Mrs. Brown: I think that would please her exceedingly.

By an unanimous standing vote, it was decided to send the group photograph to Miss Crosby.

The report of the resolutions committee was then presented. It was moved by Miss Rowan, seconded by Miss Waddell, Toronto, that a vote of thanks be tendered Mrs. Moodie of the arrangement committee, to the city hospital commission, and to the medical men of Winnipeg, for the many courtesies received.

Mrs. Brown: We have had a warm welcome in Winnipeg, and have been made to feel that we were very much at home, and no trouble. But we know that we are a trouble and that the nurses have been kept busy working for the delegates' comfort.

It was moved by Miss Westman, seconded by Miss Colvin, New Westminster, that a vote of thanks be given to the St. Boniface Alumnae and the Winnipeg General Hospital Alumnae, and to the retiring executive.

Mrs. Brown: We accept the vote in the spirit in which it is given; but we have not retired very far, as we are all back again.

It was moved by Miss Stoddard, seconded by Miss Griffin, Ottawa, that a vote of thanks be tendered to Miss Gray and to the trustees of the General Hospital; and that a similar vote be registered in advance to Lady McMillan for the tea to which the delegates were invited, and to the organizers of the banquet they would attend in the evening.

It was moved by Miss Dixon, Toronto, seconded by Miss Jamieson, Toronto, that letters of thanks be sent to the speakers at the first meeting of the convention, also to the members of the Canadian Nurse commitee, especially Miss Locke; to the local members; and to Mr. Jackson, manager of the hotel, for courtesy, attention and good work.

Mrs. Brown: I am glad Miss Dixon did not forget the gentlemen who addressed us at the joint meeting. They disappeared so quickly after the addresses that we had no time to thank them personally.

It was moved by Miss Ellis, seconded by Miss Gilroy, Winnipeg, that a resolution of thanks be sent to Miss Christie and one to Miss Crosby, with appreciation of their good work, and the assurance of the association that it intended to perpetuate their aims for the welfare of the Canadian Nurse; and that this be sent in the form of a letter, conveying the unanimous vote of the meeting.

Mrs. Brown: Miss Christie has never failed in her devotion to the Canadian National; and I am glad to be able to tell Miss Crosby that we have adopted her baby, the Canadian Nurse.

The succeeding item on the progrmme was the reading of a paper on "The Private Duty Nurse," by Miss Prout, Portage la Prairie.

Miss Brown: When it is the mother who is sick, she usually remains in the home. The men go to the hospitals and are well taken care of. In Vancouver there are many many more wards for men than for women. Even if the women are sick, they are not allowed to forget the little ones.

Miss Gilroy: I wish to express my appreciation of Miss Prout's paper. I have never heard a paper that expressed so nearly my own views.

The next and concluding paper of the session was a very amusing one, written by Miss Moodie, Calgary, on "Pioneer Nursing in the West." The first part of it was read by Miss Gilroy, Winnipeg, who was so overcome by its drollery that she was constrained to pass it to the president, Mrs. Bryce Brown, to conclude.

After this paper was read, the fifth annual meeting of the Canadian National Association of Trained Nurses was brought to a close with the singing of the National Anthem.

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REPORTS OF COMMITTEES

Secretary's Report, C. N. A., June, 1916.

The last annual meeting of the Canadian National Association of Trained Nurses was held in Halifax July 10th and 11th, 1914. The first executive meeting was held in Halifax July 11th, 1914. The following committees were appointed:

1. Federation Committee—Mrs. Aubin, Toronto; Miss F. M. Fraser, Halifax; Miss Hall, Ottawa; Miss McLellan, Vancouver. The committee was to appoint its own convener.
2. Committee on investigation of training schools for nurses—Miss Helen Randal, Vancouver, convener.
3. The Woman's Century Magazine—The nurses' page of the Woman's Century Magazine was assigned to Miss Jessie T. Scott, Vancouver.
4. Public health committee—Miss Dyke, Toronto, convener.
5. Florence Nightingale fund committee—Mrs. Bryce Brown, New Westminster, convener.
6. Nominating committee—Mrs. Hill, Winnipeg, convener.
7. Transportation committee—Miss Crosby, Toronto, convener.
8. Arrangements committee—Miss Ruth Judge, Vancouver, convener.
9. Publication committee—Miss Crosby, Toronto, convener.

10. Eligibility committee—Miss Breeze, Vancouver, convener.
11. Programme committee—Miss Jean Brown, Regina, convener.

The second executive meeting was held in Toronto, July 23, 1914. The treasurer's report showing a balance of $156.08 was presented and adopted.

The following committee was apointed to formulate plans for the purchase of the Canadian Nurse: Mrs. Pafford, Toronto, convener; Miss Locke, Miss Matheson, Miss Potts, Toronto, and Miss Madden, Hamilton.

The third meeting of the executive committee was held in Vancouver, February, 10, 1915. At this meeting, the war nursing difficulties were discussed and the action of the officers approved. The following associations were accepted into membership subject to confirmation at the next general meeting: The Nurses' Association, of Medicine Hat, Alberta; and the Vancouver General Hospital Alumnae Association.

The fourth meeting of the executive was held in Vancouver, October 13, 1915. The following associations were accepted into membership subject to confirmation at the next general meeting: The Graduate Nurses' Association of Sarnia, The St. Boniface Nurses' Alumnae Association, Winnipeg, and the Graduate Nurses' Association of Alberta.

The work of the association has been carried on entirely by correspondence, as the members of the council were too far apart to allow frequent executive meetings to be held.

War was declared so soon after the closing of the last annual meeting that the report of the two years' work is largely military. At the outbreak of the war, knowing the history of nursing in other campaigns, the president, acting for the association, offered to enrol and vouch for applicants for active service. The offer was to submit fully qualified nurses to the militia department from which number the required nurses would be selected. The offer was officially accepted by the Dominion government and the enrolling of the nurses was done through the provincial associations, working in connection with the local military headquarters. This involved a great deal of work for all the associations and we can report that organized and conscientious work was done, resulting in the enrolling of 260 of our best Canadian nurses. It was a great disappointment to the executive that when the appointments were made by the militia department, the nurses enrolled through the association had no recognition. However, this was accepted as one of the fortunes of war and seeing that the work of enrolling nurses had really served no purpose the work was discontinued.

After the nurses were in England rumors came back that some untrained women had been sent as nurses. Knowing that all Canadian nurses would be judged by those representatives sent to active service, the executive entered a protest to Sir Robert Borden. This was referred to the director-general of medical service, and the reply to this was far from satisfactory. Almost immediately after this the second contingent of nurses were appointed and among them a nurse that had been expelled from one of our Canadian hospitals and who had never finished her training elsewhere. At the request of the president a delegation was sent to Ottawa to interview Sir Robert Borden. This interview took place March 1, 1915. Although there was not much accomplished, as the nurses were already in England and appointed to

service, Sir Robert Borden assured the delegation that all precautions in the selection of applicants would be taken in the future.

Whether any untrained women went to active service as nurses between March, 1915, and March, 1916, it is impossible to say, but in March, 1916, it was learned that two untrained women were going overseas with the Ontario government hospital and that about twenty-five nurses who had had only a training in mental diseases were also appointed. The executive again approached the Ontario government and a delegation interviewed the provincial treasurer who had charge of the appointments to this unit. The nurses who had only mental training were going to do a special work and had not been given the rank of nursing sister. This fact was not apparent to the casual observer, as they had the same uniform and no distinction was made. The credentials of the untrained women had been approved by the militia department at Ottawa and the Ontario government would make no change in appointments. The unit went to active service as appointed. A second protest to Ottawa is still unanswered.

The war has brought many requests for nurses to serve in addition to the requirements of the Army Medical Corps. The requests necessitated the appointing of a special committee which was called the war committee and has done most excellent work. A full report will be given by the convener.

The work assigned the different committees will be reported by them and need not be considered with this report.

Respectfully submitted,

JEAN GUNN, Secretary.

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FEDERATION COMMITTEE

The committee appointed to report on the advisability of the federation of the Canadian Society of Superintendents of Training Schools and the Canadian National Association of Trained Nurses beg to submit the following report:

After a careful study of the two associations, it seemed wise to the committee to suggest federation in some form. According to the present arrangements the two organizations have no intercourse whatever throughout the year. This seems unwise, as the members of one association are also members of the other, and as members, are interested in the progress of both. The committee feels very strongly that the nursing organizations should be more closely united and that the by-laws of all associations should be considered with this end in view. The committee beg to submit the following plan for your consideration:

1. That the two societies become federated, the Canadian National Association of Trained Nurses being the broader in its membership, shall be the main body.
2. That each association shall have its own by-laws, officers and committees, and shall transact its own business. The by-laws of the Canadian Society of Superintendents of Training Schools for Nurses or the by-laws of any branch of the Canadian National Association of Trained Nurses formed at any later date must not conflict with the standard maintained by the Canadian National Association of Trained Nurses.

3. That the two boards of directors hold joint meetings during the year and before and after the annual meeting. These joint executive meetings shall not take the place of those of the separate organizations, but will supplement them and keep the work uniform and harmonious.
4. The annual meeting of both associations shall be held at the same time and place.

The following suggestions are offered:

(a) The programme committee and the committee on arrangements shall work together.
(b) The opening session of the convention to be a joint meeting.
(c) All sessions at which papers are read to be joint meetings.
(d) Each organization shall have its own separate business sessions, held at different times so that the nurses who are members of each organization may attend all meetings.

If the above plan is adopted, the committee would suggest that a committee of seven be appointed, three from each organization and a convener appointed by the Canadian National Association of Trained Nurses to revise the by-laws and to submit a copy of the proposed by-laws to each affiliated association and each individual member, at least three months before the next annual meeting. It shall be the duty of this committee to present the by-laws in such a form that formal adoption may be possible at the next annual meeting in 1917.

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REPORT OF PUBLIC HEALTH COMMITTEE

In July, 1914, the following resolution was adopted at the annual meeting of this association: (a) "That a standing committee on public health and social service shall be formed by the Canadian National Association of Trained Nurses; that this committee shall consist of a convener appointed by the national association, and one representative appointed by each provincial association; that the duties of each member of the committee shall be to report local progress in public health and social service nursing at every regular meeting of her provincial executive, and to mail such report promptly to the convener of the committee; that the duties of the convener shall be to receive these reports, to forward copies promptly to the other provincial representatives and to summarize these reports for the annual meeting of the national association." (b) "That a national magazine or section of a national magazine shall be devoted to public health and social service nursing."

Miss Eunice H. Dyke was appointed convener. Letters were sent in August, 1914, to Nova Scotia, New Brunswick, Ontario, Manitoba and Saskatchewan, and in October, 1914, to British Columbia and Quebec, asking each to appoint a representative. In December, the convener was able to report the appointment of the following committee: Convener, Eunice H. Dyke; Nova Scotia, Miss Myrtella Morrison; Ontario, Miss Deyman; Manitoba, Miss K. A. Cotter; Saskatchewan, Miss Jean E. Brown; British Columbia, Miss E. G. Breeze.

No replies were received from New Brunswick. In the absence of a provincial association in Quebec, suggestions regarding a basis of appointment were asked from the Montreal and Eastern Townships' Association of that province and a recommendation made that the two groups combine in appointing a representative. No action, however, was

reported upon by these associations. In December, 1914, the representatives appointed by each province was asked to prepare a report for the January meeting of her executive, and to forward it later to the convener. The same request was sent to New Brunswick, and the two associations in Quebec province. No reports were received by the convener. This was the last letter forwarded by her to the committee. In September, 1915, Miss Dyke left Toronto for eight months and wrote the secretary, suggesting that it might be wise to appoint a new convener.

While no expression of opinion has been sought from the individual members, it is the opinion of the convener that a standing committee, such as was proposed in July, 1914, can be made effective. No apparent progress, however, has been made by the present committee. At least four reasons may be assigned for the present failure—the natural difficulty of a new national undertaking, the absence of the proposed section of a magazine, the unsettled nursing conditions of war time, and the inactivity of the convener.

Copies of this report have been forwarded to each member of the committee, with the request that she ask her representative at the present annual meeting to present plans by which the purpose of the national association as expressed in July, 1914, may be accomplished.

EUNICE H. DYKE,
Convener of Committee on Public Health and Social Service Nursing.

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REPORT OF NOMINATING COMMITTEE

June 15, 1916.

To the President and Members of the Canadian National Association of Trained Nurses.

Dear Madame and Ladies:

As convener of the nominating committee of the Canadian National Association of Trained Nurses, I beg to submit my report, which is the result of my correspondence with all affiliated societies.

Respectfully submitted,
IDA M. HILL.

President, Mrs. R. Bryce Brown, New Westminster, B. C.; Miss Robena Stewart, Gravenhurst, Ont.; Miss Goodhue, Montreal; Miss Kirk, Miss Dobbs, Lethbridge; Miss Gray, Winnipeg. First vice- president, Miss Randal, Vancouver, B. C.; Mrs. Pafford, Toronto; Mrs. R. B. Brown, New Westminster; Miss Goodhue, Montreal; Miss Colvin, New Westminster. Second vice-president, Miss Robena Stewart, Gravenhurst; Miss Gilmore, Edmonton, Miss Goodhue, Montreal; Miss Hersey, Montreal. Treasurer, Miss H. Des Brisay, Montreal. Secretary, Miss Gunn, Toronto. Councillors, Miss Bella Crosby, Toronto; Miss Jean Brown, Regina; Miss Goodhue, Montreal; Miss Randal, Vancouver; Miss Madden, Hamilton; Miss Forrest, Halifax; Mrs. W. J. Hill, Winnipeg; Miss M. E. Retallick, St. John, N. B.; Miss E. G. Flaws, Toronto; Mrs. Tilley, Brantford; Miss McPhedran, Calgary; Miss Gray, Winnipeg; Miss Rowan, Toronto; Miss Cotter, Winnipeg; Miss Fairley, Montreal.

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REPORT OF PUBLICATION COMMITTEE

Madame President and Members of the Canadian National Association of Trained Nurses:

The work of the publication committee has not been heavy, but such information as has come to our hand we have sought to give prominence in The Canadian Nurse. We could have wished the task more arduous, but doubtless it has been impossible for the officers to give out much information, as their work has been so heavy and difficult.

It is the sincere wish of the committee that when the national association owns the magazine, all the nurses of Canada will be kept in close touch with the work of the association so that the aims and ideals of the national may be the aims and ideals of every association on its membership roll, and of every nurse in these associations.

We feel that we cannot conclude this report without making some reference to the nurses' column in The Woman's Century. This magazine is a woman's magazine and presents women's activities in all departments of work. But the nurses contributions have been conspicuous by their absence. This surely is not as it should be, though it may have been difficult to avoid in these troublous times. But the association needs only to be reminded of this opportunity to bring its work to the attention of the women in other departments of work, to have the matter attended to and full provision made for keeping the nurses's column full in future. This, we know, will rejoice the heart of the faithful editor of The Woman's Century, Mrs. MacIver.

All of which is respectfully submitted,

BELLA CROSBY, Convener.

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REPORT OF ELIGIBILITY COMMITTEE

Madame President and Members of the Canadian National Association of Trained Nurses:

The eligibility committee beg to report that since the last annual meeting five applications for affiliation have been received and approved by this committee. Four applications from nurses desiring individual membership have also been received, but upon enquiry were not found eligible.

Associations affiliating since last annual meeting are: The Medicine Hat Association of Graduate Nurses; The Vancouver General Hospital Alumnae Association; The St. Boniface Alumnae Association, Winnipeg, Man.; The Graduate Nurses' Association of Alberta; The Graduate Nurses' Association, of Sarnia, Ont.

ELIZABETH G. BREEZE,
Convener Eligibility Committee, Canadian National Association.

* * * *

REPORT OF THE WAR COMMITTEE

The war committee was appointed October 22, 1915, to transact all business in nursing affairs arising from war conditions. The members of the committee are: Convener, Miss Neilson; secretary, Miss Weyer, treasurer, Mrs. Wigham; Mrs. Clutterbuck, Miss Cooper, Miss Irwin, Miss Luney, Miss Crosby.

The first appointing for service came from the French Flag Nursing Corps, of London, England, which was a request to supply nurses for the French military hospitals. The nurses in this service receive a salary of $240 per year from the French government, after their arrival in France. No transportation expenses are paid and the committee sending nurses must assume the responsibility of transportation to and from Paris. The committee had this difficulty to overcome and at once sought some way with which to provide funds. The provincial associations were communicated with and asked to provide the transportation of any nurse going from the province. This means of raising funds did not prove successful. Manitoba offered to assist, while British Columbia, Nova Scotia and Quebec stated they were unable to assist in any way.

The committee appealed through the Canadian Nurse and also through the press throughout the Dominion. The sum of $300 was required for every nurse sent. Very little result came from the public appeal, and on November 22, 1915, a mass meeting of nurses was called in Toronto and the nurses appealed to personally to assist in raising the necessary funds. The nurses at once responded and the necessary amount was realized. The Hamilton nurses gave a very generous donation of $300; aside from this, all funds were collected by the nurses of Toronto. The nurses responded very well to the call and no difficulty was experienced in securing applicants.

The usual preliminary preparation, such as passports, inoculation and vaccination were arranged. As it was necessary for the nurses to speak French, arrangements were made with Mrs. Hutchins for French lessons for all the nurses appointed. Mrs. Hutchins gave the lessons free of charge, very often two daily, as the time was short.

The first unit sailed from St. John on Christmas Day. The following nurses were sent in this unit: Miss Helen McMurrick, graduate of Montreal General Hospital, who was in charge of the unit until it reached London; Miss Agnes Hanley, graduate of Bellevue Hospital, New York City, and for six years assistant superintendent of the Western Hospital, Toronto; Miss Laura Robinson, graduate of the Toronto General Hospital; Miss Mabel Joyce, graduate of the Western Hospital, Toronto; Miss Florence Morris, graduate of Vancouver General Hospital; Miss Margaret McIntyre, graduate of Sick Children's Hospital, Toronto, and post-graduate of the Women's Hospital, New York City; Miss Bertha Smith, graduate of Toronto Hospital for Incurables, affiliated with Bellevue Hospital, New York; Miss Miriam Hitchcock, graduate of Sheffield City Hospital, England, six months in Birmingham General Hospital, England, and fifteen months in the Hospital for Incurables, Toronto; Miss Madeline Jeffrey, graduate of Clifton Springs and Allied Hospitals; Miss Louisa Hopkins, graduate of Guelph General Hospital.

The nurses were entertained before sailing by Miss Hill, convener of the committee, and a tea was given in their honor by the Toronto General Hospital. After the nurses arrival in London, three were declared not eligible by the London committee. Through some misunderstanding the directions had not been sufficiently explained and the error occurred in this way. The London committee do not accept any nurse unless she has graduated from a general hospital giving a full course without any affiliation. For this reason Miss Smith and Miss Hitchcock were not eligible. Miss Hanley was declared uneligible, as

she was not British born. It was possible, through the assistance of Matron-in-Chief Macdonald, to find work for these three nurses in England. Miss Smith and Miss Hitchcock were appointed to the Canadian Army Medical Corps, and Miss Hanley secured a position in the American hospital in Paignton. Of the nurses who were sent to France, five are in Bordeaux and two in Dunkirk. Miss McMurrick has been organizing a hospital in Dunkirk and excellent reports have been received of the work of all the nurses.

On March 15, 1916, another call was received from the French Flag Nursing Corps for six nurses and at the same time a request came from the Queen's Canadian Hospital at Shorncliffe for four nurses. These nurses pay their own transportation and expenses and receive a salary of about $20 per month.

On May 9, the second unit of nurses sailed from Montreal. The following four nurses went to Shorncliffe: Miss Jessie Wilson, Sick Children's Hospital and post-graduate of Women's Hospital, New York; Miss Marion Ross, graduate of Hamilton General Hospital; Miss Jean Bryce, graduate of Isolation Hospital, graduate of the Women's Hospital, and also Metropolitan Hospital, New York; Miss Bertha Carveth, graduate of the Homepathic Hospital, New York, and also registered nurse of the state of New York.

The nurses for the French Flag Nursing Corps are as follows: Miss Sarah Cannon, graduate of St. Luke's Hospital, New York, for three years in Labrador with Dr. Grenville, who was in charge of the unit until they reached London, England; Miss Florence Irwin, graduate of the Rochester General Hospital; the Misses Sadie Jackson, Ferne Crysler, Annie Gardiner and Ruth Craig, all graduates of the Western Hospital, Toronto.

The expenses of the second unit included French lessons, as the committee did not wish to allow Mrs. Hutchins to give her time without payment. The greater part of the funds for the second unit was given by Mrs. H. D. Warren, who very generously donated $1,800.

The treasurer, Mrs. Wigham, submits the following financial report, which includes all receipts and expenditures:

Total rceipts	$5,807.04
Total disbursements	5.333.36
Balance	$ 473.68
To equipment, first contingent, 10 nurses at $50 each	$ 500.00
To equipment, second contingent, 6 nurses at $50 each	300.00
To equipment, first contingent, 10 nurses at $180 each	1,800.00
To equipment, second contingent, 6 nurses at $175 each	1,050.00
To passports, 15 nurses at $2 each	30.00
To ocean line tickets, first contingent, eastbound and return	690.95
To ocean line tickets, second contingent, eastbound and return	535.00
To Canadian Pacific Railway, first contingent	144.35
To Canadian Pacific Railway, second contingent	61.00
To cablegrams and telegrams	27.82
To advertising	12.52
To diaries, books and pencils	53.70
To refund, Miss McMurrick	20.00
To Mrs. Hutchins, re French lessons	94.00
To stamps re secretary, Miss Weyer	10.00

To stamps re treasurer, Miss Wigham	1.00
To cheque returned	3.02
Total disbursements	$5,333.36

The second unit arrived in London May 23rd and the committee had not yet heard of their final appointment.

The Allan Line and the different railroads granted a special rate to the committee and have done everything possible to make satisfactory arrangements. The committee is very grateful for the courtesy received.

The following suggestion is made that the committee for the coming year include members from each province, as it would simplify matters to have a representative in each province. The committee also suggests that some united effort be made by the association to raise funds for war purposes, as it is most probable that nurses will be needed until the end of the war.

M. WEYER, Secretary.

* * * *

REPORTS OF REGISTRATION

ALBERTA

The Alberta Association of Graduate Nurses is glad to be able to report that the registration milestone for this province has been reached, and passed. At the recent session of the provincial legislature, our requests were in some degree granted by the passing of our Registration bill, and while this did not give us all we had hoped for (what bill ever measured up to the desires of its petitioners?), we think that we have secured a good foundation on which to base our work for future developments. We were somewhat disappointed that university connection was denied us, but when a deadlock seem to be threatened and the compromise of the department of education was brought forward, it was deemed wiser to meet the legislators half way and accept.

We held out, however, for a uniform standard, which will be attained by means of examination. This method entailed some criticism, but until wiser heads than ours develop a more satisfactory system of ascertaining the standing of candidates it seemed the only course to follow. The details regarding this examination have not been worked out, and we are open to suggestions on this subject. It was decided that it would be conducted by physicians and nurses, appointed by the minister of education, the latter (meaning the nurses), being members of the association. We hope to establish a definite curriculum and an examination test which will include both practical and theoretical work. We are looking forward to the time when this test will constitute the final examination for Alberta training schools.

Sections 3 and 4 speak for themselves. Explanation of the last clause of section 3 might be in order. It seems that any one who measures up to the standard exacted by this act, and is a resident of the province at the time of its passing (viz. April 19, 1916), may legally claim registration under this section, even twenty years hence. This was tested by a member of the medical profession some years ago in British Columbia.

I am not prepared to say how the affairs of other associations in the Dominion are conducted. On the advice of both legal and medical

societies, it was decided to place ours in the hands of a council of seven, elected for two years, and eligible for re-election. This, it was thought, would facilitate both ease and expedition in the management in the business, and the two-year term of the council would promote stability in the policy of the association. Under the yearly system of holding elections, the members of the executive become accustomed to the duties attached to their various offices only in time to give way to others and no definite line of policy can be followed.

I do not think there is much more for me to say on this subject. The act is before you for discussion. There are many points on which from time to time we hope for more definite ruling, but we feel that a beginning has been made. It looks at first reading as though the graduate of the smaller hospitals benefitted more directly. This could scarcely be avoided, as we were under the necessity of recognizing all graduates resident in the province.

The response we have met with in registering the nurses of Alberta has been gratifying in spite of the very brief notice which we were able to give, and the approach of the vacation season. Over forty members were registered before the election lists were sent out.

We hope for a free discussion of our act at your meeting, and many valuable suggestions from you all as to the working out of the various details which thrust themselves upon us.

ELEANOR McPHEDRAN.

Saskatchewan.

For several years registration has been the earnest desire of a small group of nurses in Saskatchewan. Every year sees a small increase in the number interested, and the real need of registration is becoming more apparent to them and to a large number of the general public who are beginning to see where protection for them comes with registration. Our proposed bill was drafted by Mrs. Cooper, formerly superintendent of Indian Head Hospital, and Miss Jean Brown, of Regina, and submitted to the legislature in May, 1915. Owing to the decided opposition of several of the members it was withdrawn. The Dental act was introduced just before ours, and met with bitter opposition as a closed corporation act. Several old-timers among the members were firmly convinced that we were closing out the brave women of pioneer days who had given good service under hard conditions. Last April at our provincial convention at Prince Albert, a strong committee was formed to revise the proposed bill, leaving out many of the legal phrases, making it more easily understood, and to send out petitions for signatures. Every member of the legislature will be interviewed, and we feel confident that the bill will pass at the next session. Already several of our training schools have lengthened the course to three years in anticipation of the passing of the act.

British Columbia.

The proposed bill was brought up at the session in February, 1916. with very good prospects for success. Unfortunately it was so mutilated by amendments made by different members that just before the final reading it was withdrawan by the nurses. It was felt by them that in the form then given us it would make conditions worse—not better.

No reports from other provinces.

REPORT OF COMMITTEE ON INVESTIGATION OF TRAINING SCHOOLS FOR NURSES

In presenting the report of the committee on training school work in Canada, I may say that a questionaire was sent to all the provinces in January, asking that each province appoint a convener of committee to tabulate the training schools, their equipment, staff, educational requirements, etc. I regret to say that only three provinces reported—Manitoba, Ontario and British Columbia. In referring to these reports I must particularly mention the one from Manitoba which, in its clear form and condensed information, represents an enormous amount of work. In all the provinces reporting, the hospitals are, as a rule, too small to have an instructress of nurses other than the superintendent of the school. Where there are only a few hospitals in a province that are large enough to have one hundred beds and over, the great need is affiliation, in my opinion. In British Columbia most of the very small hospitals have no training schools, but are in the hands of graduates only. Those larger (25 to 50 beds), seem interested in affiliation, which gives them a chance to get in a better grade of probationers, and affords the pupils a larger and more varied experience in their training. Three British Columbia hospitals have expressed their willingness to take students from small hospitals. One is already doing it, with most satisfactory results. I would suggest that the national committee be kept as a standing committee as a means of showing each year's improvement and a desire to standardize the training.

Reports from Provinces

Ontario—Hospitals reporting, 61; hospitals with instructress, 4; graduates, other than superintendent, 25; graduate superintendent only, 18; educational requirements, high school entrance, 37; one year high school, 19; two years high school, 6.

Manitoba—Hospitals reporting, 11; instructress, 1; graduates, other than superintendent, 7; beds occupied, 6-431; length of course, all three years; educational requirements, one year high school, 3; third class certificates, 2.

British Columbia—Hospitals reporting, 21; instructress, 1; graduates, other than superintendent, 10; Beds occupied, 6-450; educational requirements, one year high school, 3; length of course, all three years.

Respectfully submitted,

HELEN RANDAL, Convener.

* * * *

REPORT OF CANADIAN NURSE PURCHASING COMMITTEE

The Canadian National Association of Trained Nurses has intended for some time to purchase the Canadian Nurse from the editorial board, and to continue its publication as the official organ of nursing affairs in Canada. For this reason a committee was appointed at the last annual meeting, held in Halifax in 1914, to investigate terms of purchasing, value of the magazine and all the details that would arise from a transfer of this kind. The committee consists of Miss Madden, from Hamilton, Ont.; Miss Potts, Miss Matheson, Miss Flaws, from Toronto; Miss Locke, convener of the committee, from Toronto.

After several meetings of the committee, a joint meeting was held with the editorial board of the Canadian Nurse. The following information is submitted:

An agreement between the editorial board and the Commercial Press, of Toronto, was entered into some years ago when no other means of continuing the magazine presented itself. By this agreement, the Commercial Press fixed the price to be paid for the magazine, in case of purchase. If the price does not meet the approval of the editorial board the matter must be settled by arbitration, a very expensive and unsatisfactory way of arriving at a conclusion. To get an intelligent report of the value of the magazine, the editorial board has had the business part of the magazine thoroughly investigated, and had a chartered accountant at work for some time under the supervision of the editorial board's lawyer.

The price asked by the editorial board is $2,000, the payment to extend over a period of four years, one quarter of the entire amount being paid each year. This is the only way in which the editorial board can once more own the magazine in order to transfer it to the Canadian National Association.

If the editorial board do not pay the amount asked, the magazine becomes the property of the Commercial Press, with the right to publish the magazine under the same name and carry on the business as usual.

Canadian nurses, so far, have had no experience with commercial nurses' magazine, but the United States has the *Trained Nurse,* for which a large number of nurses subscribe, and England has the *Nursing Mirror.*

The Canadian Nurse committee has asked several newspaper men to value the magazine and they have placed different values on it, but all think $2,000 an exorbitant sum. On the other hand, the terms of payment are fairly easy and it is doubtful if we can start a new magazine and bring it up to a paying basis, obtaining advertisements and getting subscriptions without more direct outlay. Advertisements are given and paid for according to the circulation which would be nothing in the beginning. The question to be decided was, whether the Canadian National Association wished to take over the magazine, and if the members were willing to pay the price asked.

In order to find out the opinion of the Canadian National Association on the matter, letters were sent to all the affiliated associations of Canada. The associations, with a very few exceptions, heartily approved of purchasing the magazine. The replies to the requests for financial assistance were very indefinite, with the exception of the following associations, who offered assistance immediately: The Graduate Nurses' Association of Ontario guarantees $200 annually for four years from the nurses of the province of Ontario—guaranteeing as an association, the balance required after the sum promised by Ontario nursing organizations affiliated with the National Association has been estimated. The Manitoba Association of Graduate Nurses promised $100 yearly for four years. Grace Hospital Alumnae Association, Hospital for Sick Children Alumnae Association, Riverdale Hospital Alumnae Association, Western Hospital Alumnae Association, all of Toronto, and the Hamilton City Hospital Alumnae Association promised different sums which will be given later in the report. The committee feeling that it was necessary to have definite amounts promised, planned

to raise $2,400, leaving $100 a year for remaining expenses. Each association was asked for a certain sum apportioned according to the membership to be paid yearly for four years. The following is a list of the associations and their subscriptions:

Provincial associations—New Brunswick Graduate Nurses' Association, $60 yearly for four years; Manitoba Association of Graduate Nurses, $100 yearly for four years; Graduate Nurses Association of British Columbia, $25 yearly for four years; Graduate Nurses' Association of Nova Scotia, $10 yearly for four years; Graduate Nurses' Association of Ontario, responsible for $200 yearly for four years—as the balance to be made up by the Graduate Nurses' Association of Ontario resulted in only $25 yearly for four years, the association then promised $100 yearly four years.

Province of Quebec—Canadian Nurses' Association, $25 yearly for four years; Royal Victoria Hospital Alumnae Association, $25 yearly for four years; Eastern Townships Graduate Nurses' Association, $10 yearly for four years; Jeffrey Hale Hospital have not promised financial aid; Montreal General Hospital Alumnae Association unable to give any financial assistance; Calrary Graduate Nurses' Association are willing to contribute towards the purchasing of the Canadian Nurse, but up to the present time have been unable to state the amount; Edmonton Graduate Nurses' Association unable to give any financial assistance, also think it unwise at the present time to purchase the magazine.

Affiliated associations of Ontario—Graduate Nurses' Association, Thunder Bay, Port Arthur, $20 for the first year; Victoria Hospital Alumnae Association, $25 yearly for four years; Hospital for Sick Children Alumnae Association, Toronto, $20 yearly for four years; Grace Hospital Alumnae Association, Toronto, $10 yearly for four years; Riverdale Hospital Alumnae Association, Toronto, $10 yearly for four years; Toronto Western Hospital Alumnae Association, $5 yearly for four years; Toronto General Hospital Alumnae Association, $25 yearly for four years; Hamilton City Hospital Alumnae Association, $25 yearly for four years; St. Michael's Hospital Alumnae Association, Toronto, $20 yearly for four years; Nicholl's Hospital Alumnae Association, Peterboro, $5 yearly for four years; Collingwood General and Marine Hospital Alumnae Association, $5 yearly for four years; Galt Hospital Alumnae Association, $5 yearly for four years; Graduate Nurses' Association, Ottawa, unable to give a definite reply as to financial assistance until the fall; Berlin and Waterloo Graduate Nurses' Association do not wish to give financial aid at the present time.

Early in April as the committee was still short of funds, we asked the registries of the larger cities if they would give financial assistance. We feel we owe a debt of gratitude to the Central Registry of Graduate Nurses of Toronto, which promised $100 yearly for four years. "Rome was not built in a day." The committee is now able to report a total of $630 yearly for four years, and we wish to thank the associations most heartily for their co-operation.

The following suggestions as to the plan of publishing the magazine with as little outlay as possible are offered:

First, appointment of an editor, preferably a nurse. If at first the association is unable to pay the salary of a nurse to act as editor, it might be possible to appoint a lay person as editor at a lower salary, as there are many women doing literary work whose time is not fully occupied. If the latter is adopted, the committee would suggest the ap-

pointment of a small committee who will approve of all material before publishing. The committee was asked to suggest an editor and are glad to report that Miss Helen Randal, of Vancouver, will act as editor, if the association so desires it.

Second, a secretary or stenographer who shall be resident in the city where the magazine is published, who shall also be on salary.

Third, a business manager. It is suggested that the business manager be a nurse who can give the necessary time and who shall be resident in the city in which the magazine is published.

Fourth, it is suggested that each provincial association be asked to assume a certain responsibility in connection with the magazine by appointing in each province an assistant business manager whose duties shall be to solicit subscriptions and advertising throughout the province. These assistant business managers will be under direct supervision of the business manager.

In this way it will be possible for each province to share responsibility and to save the salaries which would be necessarily paid to advertising and subscription agents. The committee suggests that for the first few years all the necessary work be done by the nurses, with the exception of the salaries of the editor, the secretary and the printing and mailing.

HELEN G. R. LOCKE,
Convener of Committee for the purchasing of the *Canadian Nurse*.

* * * *

TREASURER'S REPORT

In these reports I regret to say that the treasurer's report was not sent to me in time for publication. It will be printed in the next number. It showed an amount in the bank to our credit.—Editor.

* * * *

OFFICERS 1916-1917

President, Mrs. Bryce Brown, New Westminster; First Vice-President, Mrs. Paffard, Toronto; Second Vice-President, Miss M. Hersey, Montreal; Secretary, Miss Jean Gunn, Toronto; Treasurer, Miss DesBrisay, Montreal.

Councillors—Miss Bella Crosby, Toronto; Miss Goodhue, Montreal; Miss M. E. Retallack, St. John, N. B.; Mrs. Tilley, Brantford; Miss Grey, Winnipeg; Miss Randal, Vancouver.

At Buckingham Palace the King has conferred the Royal Red Cross upon the following members of the Canadian army nursing service: Miss Eleanor M. Charleson (matron), first class; Miss Janet Andrews (nursing sister), second class, and Miss Ethel Marie Holmes (nursing sister), second class. Miss Charleson has been superintendent at Toronto and at Ottawa, and has served in England, France, at Lemnos and at Saloniki. Miss Andrews, who comes from Calgary, has served in England and France, and Miss Holmes, who is from Montreal, has also worked in England and France.

Editorial

THE CANADIAN NURSE

With this issue the Canadian Nurse magazine becomes the official organ of the Canadian National Association of Trained Nurses, and it has seemed fitting that this issue should contain the official account of the convention in Winnipeg in June. This convention, with its delegates from all over our dominion, made us again feel how truly national it really was, and how much could be done by it as a body. The warm-hearted welcome and entertainment of the Winnipeg nurses will not soon be forgotten by those fortunate enough to be present at the 1916 meeting.

* * * *

TO THE NURSES OF CANADA

As mentioned above, the *Canadian Nurse* magazine is now yours—bought and owned by each one of you. It has been something long planned and hoped for, and now we have our opportunity. To those of us who feel that we have been negligent or luke-warm in our support of the only nursing journal in Canada, comes our chance to do our best. It is, as you know, an expensive time to print anything, owing to the high cost of paper, and unless each one will help by doing her "bit," the financial outlook will be serious. The first year in anything is always the most expensive, and as we are financially responsible for its success, let us get to work. To make it a paper which each nurse will feel she must have, it must have news. Asking various nurses what they looked for first in the nursing journals, they usually replied, "the personal column or the letters." Now the editor is only human, and can only publish what is sent in. Write and tell us what each one from your own hospital is doing. Every graduate from that school will be interested. Send letters on any matter you are interested in. Names will not be printed, but they must be sent to the editor, as evidence of good faith. Articles or experiences will be welcome, but above all, send your dollar, if not already a subscriber; and make yourself a subscription agent. Surely each of us can get our friends to help the magazine to that extent.

Advertising matter is urgently needed; it is the "bread and butter" of the magazine as one editor expresses it. Ask your hospitals to advertise vacancies on the staff, their training school, etc.

To criticize is always easy, and the new editor feels very keenly just how hard the work is going to be and how she can do nothing without your help and co-operation.

* * * *

THE LATE EDITOR

To Miss Crosby, the nurses of Canada really owe their magazine for the past few years. She has, in spite of many difficulties, given her very best to it, and but for her, it would have died a natural death long

before this. She gave to it her very best. It would, indeed, have been gratifying to her could she have heard the remarks made at the convention in Winnipeg in reference to her work as editor, and to her interest in the magazine. The present editor begs for the same help and consideration, and can only do her best.

The September number is late, owing to many reasons. We beg for your appreciation of the difficulties of the transfer and making of new arrangements.

All subscriptions, advertisements and matter to be printed to be sent to the editor,

MISS HELEN RANDAL,
302 Fifteenth Avenue,
East Burnaby,
British Columbia.

Hospitals and Nurses

BRITISH COLUMBIA

The quarterly meeting of the Graduate Nurses' Association of British Columbia will be held at 8 o'clock, Friday evening, October 6, at the Vancouver Hotel. An interesting programme has been prepared.

MILLIGAN-CROMIE

On July 20, in London, England, Miss Mary Milligan, graduate of the Royal Jubilee Hospital, Victoria, B. C., to Colonel Cromie, R.A.M.C. Miss Milligan left Victoria with the British Columbia hospital in August, 1915, and has been in Saloniki with the hospital. Colonel Cromie is now on active service in France.

* * * *

ONTARIO

On June 19, at Hamilton, Miss Mina Rodgers, graduate of the Hamilton City Hospital, to Dr. Herbert H. Sinclair, of Walkerton, Ont.

On June 20, 1916, at Exeter, Ont., Vera Ada Etheline Campbell, graduate of the Hamilton City Hospital, to Dr. George Edward Jurben Lannin, of Hamilton.

Miss Catherine E. Erwin, Hamilton City Hospital, is stationed at Ramsgate, Kent, England.

Miss Elizabeth Aitken has been transferred from Ramsgate, Kent, England, to No. 2 Canadian Stationary Hospital, France.

Miss Etta McLeary, Hamilton City Hospital, of Vancouver, was a recent visitor in Hamilton.

Miss Bessie Sadler has returned from an enjoyable month's holiday, spent at Dwight Muskoka.

Mrs. Margaret Reynolds and Miss Emma J. Deyman are visiting at the former's home in Montreal.

This is the season for picnics all over the country, but those of you who have never attended a prairie picnic do not know all the possibilities of that kind of entertainment. In each district one picnic, at least, is held just before the busy time for farmers arrives. It is held at the school house; is an all-day and all-night affair, consisting of games and contests outside; of concerts or some such entertainment inside, followed by dancing and a second supper. The whole thing goes on until 4 or 5 o'clock in the morning, when the tired but happy couples start for their homes, many miles distant. Motors are now supplanting the big wagons and part of the fun is usually helping to haul out a motor that has got stuck in a slough. And with what a vim they set to it! On the green, the excitement is intense in the baseball game. Here, as in the concert, the talent is purely local, and so the rivalry is very keen. You will see the young girls and the dignified dames "rooting" to put the men and boys to shame, and the victors are welcomed with open arms, and so, too, are the defeated. The races and other contests all come in for their share, and it is a pretty sight to see the happy faces of the crowd—no care exists in them for the moment. The girls dress in their brightest; the colors do not always blend; and the men in their shirt sleeves, taking their turn in "minding baby," who is remarkably good, considering the smoke that is puffed into his little face and the jars he gets, when papa gets excited in an argument.

The beautiful prairie stretches far, far away; the horses neigh; the shouts of laughter are heard as the people devour the good things, and the sun goes down, lingering to shed his color over the happy scene, as though loath to leave it all.

Inside, the crowd is solid; benches are made between the desks and every available spot is used. Boys climb up on the top of the closet and keep the audience reminded of their presence by their shouts and sallies—more or less witty. The performers are welcomed, and listened to with the most sympathetic attention, and when they finish, are applauded lustily.

It is at gatherings of this kind that the opportunity is seized to launch some good scheme for the welfare of the community, such as the establishing of a country nurse or the building of a little hospital for the district, and the result is usually very promising. In all, the real people in the community attend these picnics and are just as ready

to be interested in schemes to relieve suffering as in the sports and frolics.

As the end of the concert draws near, the sleepy little children are awakened and made ready for the drive home, and when the dance begins considerable thinning out has been done. Those remaining are full of eager expectations and many a happy union follows in the wake of these prairie picnics.

To know what they mean, how full of life, of hope and of kindly love they are, you must attend one and enter into all its enjoyments, with a real heartiness. They are very characteristic of western life and western ideals.

* * * *

The Victorian Order of Nurses for Canada offers a post-graduate course in district nursing and social service work. The course takes four months, and may be taken at one of the Training Homes of the Order: Toronto, Ottawa, Montreal, Vancouver. For full information apply to the Chief Superintendent, 578 Somerset Street, Ottawa, or to one of the District Superintendents, at 281 Sherbourne Street Toronto, Ont.; 46 Bishop Street, Montreal, Que.; or 1300 Venables Street, Vancouver, B. C.

The Neurological Institute of New York

offers a six months' Post Graduate Course to Nurses. Thorough practical and theoretical instruction will be given in the conduct of nervous diseases, especially in the application of water, heat, light, electricity, suggestion and re-education as curative measures.

$20.00 a month will be paid, together with board, lodging and laundry. Application to be made to Miss G. M. Dwyer, R.N., Supervisor of Nurses, 149 East 67th St., New York City.

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Board of Directors—Misses Wilson, Millan, Nash, Wilson, Didsbury, M. A. MacKenzie, Dyke, Kinder and J. Ferguson.

Representatives to Central Registry Committee—Misses Wardell and Didsbury.

"The Canadian Nurse" Representative—Miss Jessie Ferguson, 596 Sherbourne St.

Regular Meeting—First Tuesday, every second month.

THE ALUMNAE ASSOCIATION OF VICTORIA HOSPITAL TRAINING SCHOOL FOR NURSES, LONDON, ONTARIO

President—Miss A. MacDougal; Vice-President, Miss McVicar; Secretary-Treasurer, Miss L. Whiting.

Conveners of Committees—Sick Visiting, Social and Look-Out, Miss Ida Rasser, Victoria Hospital; Programme, Miss Mary Mitchell, 77 Grey St.

Programme Committee—Miss Cline, Miss Whiting, Miss Smallman, Miss McVicar.

"The Canadian Nurse" Representative—Mrs. W. Cummins, 95 High St.

Regular Meeting—First Tuesday, 8 p. m., at Victoria Hospital.

THE TORONTO WESTERN HOSPITAL ALUMNAE ASSOCIATION

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Representatives on Central Registry Committee—Misses Wice and Cooney.

"The Canadian Nurse" Representative—Miss Chisholm, 30 Brunswick Ave.

Regular Meeting—First Friday, 3 p. m.

THE ALUMNAE ASSOCIATION OF TORONTO GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES

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Representative to "The Canadian Nurse"—Miss Lennox, 32 Bernard Ave.

Regular Meeting—First Wednesday, 3.30 p. m.

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Regular Meeting—First Tuesday, 3 p. m.
The Canadian Nurse Representative—Miss D. E. Street, 137 Catherine St. North.
Committee—Misses Kennedy, C. Kerr, M. Brennen, Waller and Mrs. Newson.

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Representative to "The Canadian Nurse"—Miss Elsie Henderson.
Representative on Central Registry Committee—Misses Irvine and Hammill.
Regular Meeting—Second Tuesday, 3 p. m.

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Representatives on Central Registry Committee—Misses Piggott and Rork.
Representative "The Canadian Nurse"—Miss J. G. McNeill.
Regular Meeting—First Thursday, 8 p. m.

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Conveners of Committees—Executive, Miss Stella Gordon, 251 Stradbrook Ave., Winnipeg; Social, Miss E. Manion, 191 Home St., Winnipeg; Sick Visiting, Miss J. Stensly, 753 Wolsley Ave.
Regular Monthly Meetng—Second Thursday at 3 p. m.

THE ALUMNAE ASSOCIATION, TORONTO FREE HOSPITAL TRAINING SCHOOL FOR NURSES, WESTON, ONT.

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Conveners of Committees—Finance, Miss B. Dyer; Programme, Miss McBeath; Membership and Visiting, Miss Nichol; General Nursing and Social, Miss Moore.

Representative to "The Canadian Nurse"—Miss M. Doherty.

Regular Meeting—First Monday, 4 p. m.

THE ALUMNAE ASSOCIATION OF THE WOODSTOCK GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES

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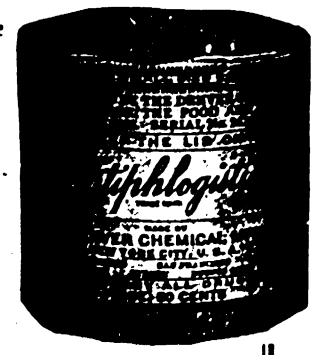

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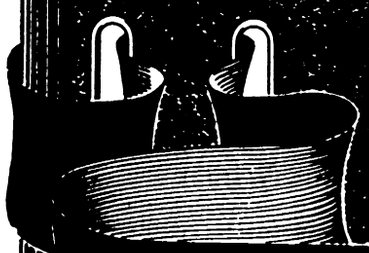

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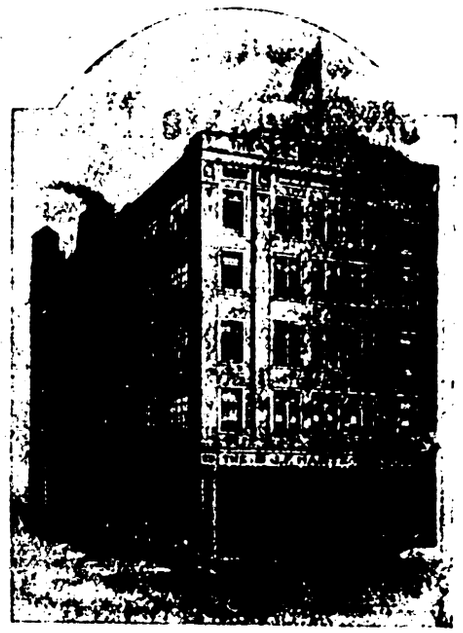

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